



STAFFORDSHIRE COUNTY COUNCIL

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# ANNUAL REPORT

OF THE

**County Principal  
School Medical Officer**

**For the year 1960**





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## SCHOOL HEALTH SERVICE STAFF, 1960

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### County Principal School Medical Officer

G. RAMAGE, M.A. (Admin.), M.D., Ch.B., B.Sc., M.R.C.S., L.R.C.P.,  
D.P.H.

### Deputy Principal County School Medical Officer

H. BINYSH, M.D., M.B., B.S., L.R.C.P. & S. (Ed.), L.R.F.P.S. (Glas.),  
D.P.H., D.T.M. & H., Barrister-at-Law.

### Senior Medical Officer for Schools

C. S. SMITH, M.B., B.S., M.R.C.S., L.R.C.P.

### Whole-time School Medical Officers

(engaged in the School Health Service)

ELIZABETH O. ASTON, L.M.S.S.A.

A. G. BAILEY, M.B., Ch.B. (Appointed 21.7.60).

J. H. E. BAINES, M.B., Ch.B.

HAZEL B. BAKER, M.B., B.S., M.R.C.S., L.R.C.P. (Resigned 31.8.60).

AGNES W. E. BLACK, M.B., B.Ch., B.A.O., D.P.H.

PEARL I. BLENCH, L.R.C.P., L.R.C.S., L.R.F.P.S.

MARGARET J. CASH, M.R.C.S., L.R.C.P., D.P.H.

NORAH M. CLARKE, M.B., Ch.B.

G. R. DAVIES, B.Sc., L.M.S.S.A.

DOREEN E. GEORGE, M.B., Ch.B.

BESSIE W. GOODWILL, M.B., Ch.B., M.R.C.S., L.R.C.P.

P. M. GREEN, M.B., Ch.B.

F. G. E. HILL, M.B., Ch.B., D.P.H.,

MARY M. MARKHAM, M.B., Ch.B., D.T.M., D.P.H. (Appointed 28.3.60).

G. J. O'CONNOR, M.B., B.C.H., B.A.O. (Appointed 3.11.60).

G. S. PHILLIPS, M.B., Ch.B., D.T.M. & H.

J. TORLEY, M.B., Ch.B., (Appointed 5.10.60).

HENRIETTA M. WILSON, B.A., M.B., B.Chir.

### School Medical Officers

#### holding Joint Appointments

(engaged in the School Health Service)

A. BLENCH, L.R.C.P., L.R.C.S., L.R.F.P.S., D.P.H. (M.O.H. Tamworth  
M.B.) (Appointed 5.9.60).

P. G. CANNON, M.B., Ch.B., D.P.H. (M.O.H. Biddulph U.D. and Leek  
U.D.) (Resigned 30.6.60).

G. CREMER, L.R.C.P.I. & L.M., L.R.C.S.I. & L.M., D.P.H., D.C.H.  
(M.O.H. Brownhills U.D.) (Appointed 10.2.60).

SHEILA M. DURKIN, M.B., B.Ch., D.P.H. (Area Medical Officer and  
M.O.H. Uttoxeter U.D. and R.D.),

A. D. KELLY, L.R.C.P.I. & L.M., L.R.C.S.I. & L.M., D.P.H. (M.O.H. Coseley U.D.) (Appointed 1.10.60).  
 R. C. GUBBINS, M.B., Ch.B., D.P.H. (M.O.H. Willenhall U.D.).  
 J. HEAGNEY, M.B., B.Ch., D.P.H. (M.O.H. Darlaston U.D.).  
 A. R. KENNEDY, M.B., Ch.B., B.Sc., M.R.C.S., L.R.C.P., D.P.H. (M.O.H. Amblecote U.D. and Seisdon R.D.).  
 A. F. MORGAN, M.B., B.S., L.R.C.P., L.R.C.S., L.R.F.P.S., D.P.H. (M.O.H. Tamworth M.B.) (Resigned 31.3.60).  
 F. J. MURRAY, L.R.C.P.I., L.R.C.S.I., L.M., D.P.H. (M.O.H. Stone U.D. and R.D.).  
 J. P. NEYLON, M.B., B.Ch., B.A.O., D.P.H., D.C.H. (M.O.H. Bilston M.B.).  
 A. G. THOMSON, M.B., Ch.B., D.P.H. (M.O.H. Stafford R.D. and Cannock R.D.).  
 E. H. TOMLIN, M.D., Ch.B., D.P.H. (Area Medical Officer and M.O.H. Cheadle R.D.).  
 P. J. C. WALKER, M.B., Ch.B., M.R.C.S., L.R.C.P., D.P.H. (M.O.H. Wednesfield U.D.).  
 R. WEBSTER, M.B., Ch.B., D.T.M. & H., D.P.H. (Area Medical Officer and M.O.H. Cannock U.D.).  
 H. E. WILSON, M.B., Ch.B., D.P.H. (M.O.H. Leek U.D.).

### **Part-time School Medical Officers**

(engaged in the School Health Service)

MARGARET BAMBER, M.B., B.Ch., B.A.O.  
 W. C. CAMPBELL, L.M.S.S.A.  
 EILEEN N. COSGRAVE, M.B., B.Ch., B.A.O.  
 JEANNETTE R. B. GIBSON, L.R.C.P., L.R.C.S., L.R.F.P.S. (Glas.)  
 IVY R. GIFFORD, M.B., Ch.B. (Dental Anaesthetist).  
 ROSE MACAULIFFE, M.B., B.Ch., B.A.O.  
 MURIEL NANKIVELL, M.B., Ch.B. (Part Time Officer as from 19.12.60).  
 ELEANOR M. PRENDIVILLE, L.R.C.P.I., L.R.C.S.I., L.M., D.P.H.  
 EDITH G. SHERWOOD, M.R.C.S., L.R.C.P. (Dental Anaesthetist).

### **Specialists**

(engaged in the School Health Service)

PRINCIPAL MEDICAL OFFICER FOR MENTAL HEALTH:

E. JOHNSON, M.R.C.S., L.R.C.S. (Appointed 2.5.60).

CONSULTANT PSYCHIATRIST :

J. PEDLEY BAKER, M.B., Ch.B., M.R.C.S., L.R.C.P., D.P.M.  
 (Appointed 1.4.60).

PART-TIME OPHTHALMIC SPECIALISTS :

A. N. CAMERON, M.B., Ch.B., F.R.C.S., D.O.M.S. (Resigned 6.5.60).  
 J. A. COX, M.B., B.S., D.O. (Appointed 29.8.60).  
 G. F. HAYCRAFT, M.R.C.S., L.R.C.P., D.O.M.S.  
 B. U. KILLEN, M.B., B.Ch., B.O.A., D.O.  
 E. J. McCABE, M.B., Ch.B., D.O.  
 B. M. McOWAN, M.R.C.S., L.R.C.P., M.B., B.S., D.O.(Ldn.)  
 (Appointed 3.10.60).

\*H. CAMPBELL ORR, M.B., Ch.B., F.R.F.P.S.

PART-TIME ORTHOPAEDIC SPECIALISTS :

\*J. HIRTENSTEIN, M.D., F.R.C.S.

M. H. M. HARRISON, Ch.M., M.B., Ch.B., F.R.C.S.

PART-TIME E.N.T. SPECIALISTS :

G. O. CLARK, M.B., Ch.B., F.R.C.S.

W. D. PATERSON, M.B., Ch.B., F.R.C.S.

\*Attends County Clinics as Regional Hospital Board Officer.

## **Principal County School Dental Officer**

D. DAVIES, M.B., Ch.B., B.D.S., L.D.S. (Resigned 19.5.60).  
J. C. TIMMIS, L.D.S., R.C.S. (Eng.) (Appointed 7.11.60).

## **Whole-time School Dental Officers**

J. BRYDONE, L.D.S., R.C.S. (Retired 31.5.60).  
J. W. DAVIES, L.D.S.  
R. B. DEARNLEY, L.D.S. (Re-Appointed 11.1.60).  
S. FORD, L.D.S., R.C.S.  
J. HICKEY, B.D.S.  
J. L. JACQUES, L.D.S., R.C.S.  
MISS M. C. LAUDER, L.D.S., R.C.S.  
J. D. NELSON, L.D.S.  
T. C. J. PRICE, B.D.S.  
L. H. THOMPSON, L.D.S.

## **Part-time School Dental Officers**

P. CAULDWELL, L.D.S.  
MRS. E. M. CAULDWELL, B.D.S.  
B. C. R. FOSTER, L.D.S., R.C.S. (Resigned 31.7.60).  
MRS. C. E. HUGHES, L.D.S. (Resigned 30.11.60)  
L. F. KELLY, L.D.S., R.F.P.S.  
R. WARNER, L.D.S. (Appointed 22.11.60).  
J. K. WILLIAMS, L.D.S. (Appointed 2.5.60).  
F. C. WINTER, L.D.S.  
MISS A. P. WOOD, B.D.S.

## **Medical Auxiliaries**

### **PHYSIOTHERAPISTS :**

MISS F. M. BARNES, C.C.S.P.  
MISS J. MCLEAN, M.C.S.P.  
MRS. M. LEWIS, M.C.S.P.

### **SPEECH THERAPISTS :**

MISS H. M. BINKS, L.C.S.T.  
MISS J. L. BASSETT, L.C.S.T. (Appointed 12.9.60).  
MRS. BARBARA J. COOPER, L.C.S.T. (Resigned 30.4.60).  
MISS GOSS-CUSTARD, L.C.S.T. (Appointed 7.9.60).  
MISS A. JONES, L.C.S.T. (Appointed 7.9.60).  
MRS. A. M. PRICE, L.C.S.T. (Appointed 12.9.60).  
MRS. M. H. SHELDON, L.C.S.T. (Resigned 30.6.60).

### **EDUCATIONAL PSYCHOLOGISTS :**

MISS E. KELLEHER, B.A., Dip. Psych. (Appointed 19.7.60).  
MRS. M. I. CHRISTINE SHEPHERD, B.A.

### **AUDIOMETRICIAN :**

MRS. E. C. SPENCER, S.R.N.



## SUMMARY OF ASSISTANT STAFF

<i>Staff</i>	<i>Establishment</i>	<i>No. Employed on 31.12.60</i>	<i>Equivalent in terms of Whole-time Staff</i>
School Medical Officers ... ..	22	39	18.6
School Dental Officers ... ..	29	17	13.5
Physiotherapists ... ..	3	3	3
Speech Therapists ... ..	6	5	4
School Nurses ... ..	39.78	141	33.5
Clinic Nurses ... ..	6.6	12	6.6
Lay Hygiene Assistants ... ..	3.29	4	3.29
Dental Attendants ... ..	30	17	13.9
Clerks ... ..	24	24	24
Audiometrician ... ..	1	1	1
Audiometric Clerk ... ..	1	1	1

## GENERAL INFORMATION

	<i>Urban Areas</i>	<i>Rural Areas</i>	<i>Admin. County</i>
Estimated civilian population of Administrative County (Mid. 1959) ... ..	725,760	245,040	970,800
Acreage ... ..	100,012	585,227	685,239
Density of population per acre ...	7.21	0.40	1.41
Mean area per person in acres ...	0.14	2.39	0.71

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1. Estimated School Population of Administrative County (excluding Newcastle) ... ..	139,410
2. Estimated School Population of Newcastle Excepted District ... ..	13,767
3. Average attendances (excluding Newcastle) ... ..	123,524
4. Average attendances (Newcastle only) ... ..	12,227
5. Number of schools and departments in the County (incl. Newcastle):—	
Nursery Schools ... ..	17
County Primary Schools ... ..	313
Voluntary Primary Schools ... ..	219
County Secondary Modern Schools ... ..	98
Voluntary Secondary Modern Schools ... ..	8
County Secondary Grammar and High Schools ... ..	29
Comprehensive Schools ... ..	4
Special Schools—Residential ... ..	6
Day ... ..	2
Hospital ... ..	2
Total ... ..	698

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## Causes of Death

The following table shows the causes of death in children between the ages of 5 and 15 years during 1960 according to the vital statistics supplied by the General Register Office.

CAUSES OF DEATH							
1.	Tuberculosis, respiratory	...	...	...	...	...	—
2.	Tuberculosis, other	...	...	...	...	...	—
3.	Syphilitic disease	...	...	...	...	...	—
4.	Diphtheria	...	...	...	...	...	—
5.	Whooping Cough	...	...	...	...	...	—
6.	Meningococcal infections	...	...	...	...	...	—
7.	Acute Poliomyelitis	...	...	...	...	...	1
8.	Measles	...	...	...	...	...	—
9.	Other infective and parasitic diseases	...	...	...	...	...	—
10.	Malignant neoplasm stomach	...	...	...	...	...	—
11.	Malignant neoplasm lung bronchus	...	...	...	...	...	—
12.	Malignant neoplasm breast	...	...	...	...	...	—
13.	Malignant neoplasm uterus	...	...	...	...	...	—
14.	Other malignant and Lymphatic neoplasms	...	...	...	...	...	3
15.	Leukæmia, aleukæmia	...	...	...	...	...	3
16.	Diabetes	...	...	...	...	...	—
17.	Vascular lesions of nervous system	...	...	...	...	...	1
18.	Coronary disease, angina	...	...	...	...	...	1
19.	Hypertension with heart disease	...	...	...	...	...	—
20.	Other heart disease	...	...	...	...	...	—
21.	Other circulatory disease	...	...	...	...	...	—
22.	Influenza	...	...	...	...	...	—
23.	Pneumonia	...	...	...	...	...	1
24.	Bronchitis	...	...	...	...	...	1
25.	Other diseases of respiratory system	...	...	...	...	...	—
26.	Ulcer of stomach and duodenum	...	...	...	...	...	—
27.	Gastritis, enteritis and diarrhœa	...	...	...	...	...	1
28.	Nephritis and nephrosis	...	...	...	...	...	4
29.	Hyperplasia of prostate	...	...	...	...	...	—
30.	Pregnancy, childbirth, abortion	...	...	...	...	...	—
31.	Congenital malformations	...	...	...	...	...	7
32.	Other defined and ill-defined diseases	...	...	...	...	...	11
33.	Motor vehicle accidents	...	...	...	...	...	13
34.	All other accidents	...	...	...	...	...	19
35.	Suicide	...	...	...	...	...	—
36.	Homicide and operations of war	...	...	...	...	...	—
Total							66

# **Annual Report of the County Principal School Medical Officer 1960**

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The year under review has shown considerable progress both in the health of the school children and the improvement of the services.

The number of pupils found to require treatment remains approximately the same and there is generally no significant change in the nature of their defects. One exception to this is the considerable increase reported in plantar warts, which is, of course, an infectious condition. Guidance in avoiding the infection has been given but obviously has not had the desired effect. The table on page 71, giving the estimated nutritional state, shows that the proportion of undernourished older children is very small, but a significant number of the entrant group was noted by the doctors to be of sub-normal nutrition. While some of the latter increase is undoubtedly real, the difficulty of judging nutrition is much greater at this particular age.

The table showing the details of the home visits made by the nursing staff reflects, in an interesting way, the tendencies of the school health work in recent times. The visits on account of uncleanliness and verminous conditions remain virtually unaltered and this unfortunate and unnecessary state has been commented on in previous years. The reduction in visits for nose and throat conditions (mainly tonsils) is due to the more accurate notification of cases which have received operative treatment and have therefore been removed from the waiting lists. The large economy in time noted in connection with ophthalmic defects is due to the use by all the eye surgeons of cyclogil which need not be administered prior to attendance at the clinic. The number of educationally sub-normal children constantly mounts and causes more home visiting and, indeed, the only significant waiting list for handicapped pupils is for this category.



The appointment during the year of Dr. Johnson as Principal Medical Officer for Mental Health and an Educational Psychologist, enabled some diagnostic child guidance work to be resumed. In the same period the Mental Health Centre in Lichfield was completed and only awaits the necessary staff to function completely. The latter necessity is, unfortunately, unlikely to be fulfilled in the near future, although it is the intention of the Regional Hospital Board to make the time of a psychiatrist available for both Lichfield and Stafford Clinics at as early a date as possible.

During the year, testing of the hearing of pupils was undertaken for the six year old group in place of the eight year old group. Although testing of the younger group is a more difficult and time consuming procedure, it is thought worth while since it enables earlier advice regarding handicapped children to be given to the teachers. The Audiometrician has been successful in testing with the younger age group, although the change has involved breaking the joint visitation to schools with the nurse who tests the vision of the eight year old group, which remains unaltered.

The considerable increase in the provision of new kitchens and the modernisation of others is noted with satisfaction. There is close co-operation with the Education Department on the design and maintenance of hygienic conditions in these kitchens and the importance of this side of the work is obvious. Equally important as the provision of good premises is well trained and careful personnel. The establishment of a training school for the kitchen staff is therefore a valuable step forward and the School Health Department has assisted in providing lectures on food hygiene.

The work undertaken in "minor projects" during the last year or two is now bearing fruit and the number of hygiene defects reported by the School Medical Officers are fewer this year. There remain a number of schools, principally in the rural parts of the County, where important defects exist. Although no undesignated milk is now supplied to any school, "undesignated" water is still being supplied to 32 of them which have no mains water supply. Out of 236 samples taken from 70 schools, 88 were found to be unsatisfactory.



Although a careful routine is maintained to ensure the harmlessness of the water consumed by the children, a potential danger to health exists.

The routine testing of the water of swimming baths used by county school children has been undertaken for many years and this duty has been increased by the opening of swimming pools at individual schools. A new one was opened during the year at Wednesfield, bringing the total to 7, of which 2 are not supplied with mechanical filtration.

The helpful co-operation of other Departments, particularly the Education Department, has continued this year and again played a large part in enabling the year's work to be achieved. The staff in all Sections has worked conscientiously to produce a satisfactory year and they are much encouraged in their efforts by the enthusiasm and interest of the Committee.

*G. RAMAGE.*

*County Principal School Medical Officer.*

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# Annual Report

## PART I.—INSPECTIONS AND OTHER

### EXAMINATIONS

**Table I. Medical Inspection of pupils attending Maintained and Assisted Primary and Secondary Schools (including Nursery and Special Schools).**

*A.* Periodic Medical Inspections:

Age Groups Inspected

(by year of birth)

1956 and later	591	} Entrants.
1955	6,911	
1954	5,522	
1953	1,257	
1952	424	} 2nd Age Group.
1951	243	
1950	3,569	
1949	5,596	
1948	2,413	
1947	393	} 3rd Age Group.
1946	4,035	
1945 and earlier	8,918	
Total	39,872	

*B.* Number of Other Inspections:

Special Inspections	31
No. of Re-inspections	25,092

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Total	25,123
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C. Pupils found to require treatment at Periodic Medical Inspections (excluding Dental Diseases and Infestation with Vermin).

<i>Age groups Inspected By year of birth</i>			<i>For defective vision (excl. Squint)</i>	<i>For any of the other conditions recorded in Pt. II</i>	<i>Total Individual Pupils</i>
1956 and later	...	...	6	40	43
1955	...	...	82	371	429
1954	...	...	77	357	398
1953	...	...	33	95	121
1952	...	...	29	49	49
1951	...	...	15	24	39
1950	...	...	113	156	285
1949	...	...	166	221	359
1948	...	...	42	116	150
1947	...	...	13	16	33
1946	...	...	157	213	313
1945 and earlier	...	...	294	403	639
Total	...	...	1,027	2,061	2,860

Table 2(a). Defects found by Medical Inspection  
Periodic Inspections

Defect or Disease		ENTRANTS		LEAVERS		OTHERS		TOTAL	
		Requir- ing Treat- ment	Requir- ing Obser- vation	Requir- ing Treat- ment	Requir- ing Obser- vation	Requir- ing Treat- ment	Requir- ing Obser- vation	Requir- ing Treat- ment	Requir- ing Obser- vation
Skin	...	84	342	208	402	108	366	400	1,110
Eyes—(a) Vision	...	155	453	435	1,250	378	1,160	968	2,863
(b) Squint	...	55	232	16	100	35	182	106	514
(c) Other...	...	10	89	16	83	32	135	58	307
Ears—(a) Hearing	...	25	134	16	102	25	225	66	461
(b) Otitis Media...	...	22	421	26	133	44	520	92	1,074
(c) Other...	...	18	121	34	147	66	198	118	466
Nose and Throat...	...	218	1,810	63	526	141	2,008	422	4,344
Speech ...	...	27	365	6	62	17	155	50	582
Lymphatic Glands	...	38	587	3	93	17	246	58	926
Heart ...	...	12	179	32	130	10	148	54	457
Lungs ...	...	51	773	14	222	24	429	89	1,424
Developmental—	...								
(a) Hernia	...	16	94	6	14	6	60	28	168
(b) Other...	...	8	300	18	65	10	67	36	432
Orthopaedic—	...								
(a) Posture	...	9	130	23	319	22	302	54	751
(b) Feet ...	...	157	410	54	293	74	320	285	1,023
(c) Other...	...	31	445	55	155	49	588	135	1,188
Nervous System—	...								
(a) Epilepsy	...	6	50	4	40	1	54	11	144
(b) Other...	...	6	200	4	7	6	167	16	374
Psychological—	...								
(a) Development	...	7	159	—	73	17	182	24	414
(b) Stability	...	4	249	5	123	19	299	28	671
Abdomen ...	...	10	70	7	53	24	121	41	244
Other ...	...	49	208	30	195	5	10	84	413



**Table 2(b). Defects found by Medical Inspection**  
**Special Inspections**

<i>Defect or Disease</i>	SPECIAL INSPECTIONS	
	<i>Pupils requiring Treatment</i>	<i>Pupils requiring Observation</i>
Skin ... ..	—	—
Eyes—(a) Vision ... ..	1	2
(b) Squint ... ..	—	1
(c) Other... ..	—	—
Ears—(a) Hearing ... ..	—	1
(b) Otitis Media... ..	1	—
(c) Other... ..	—	—
Nose and Throat... ..	1	1
Speech ... ..	1	5
Lymphatic Glands ... ..	—	—
Heart ... ..	—	—
Lungs ... ..	—	1
Developmental—		
(a) Hernia ... ..	—	1
(b) Other... ..	—	2
Orthopaedic—		
(a) Posture ... ..	—	1
(b) Feet ... ..	—	1
(c) Other... ..	—	4
Nervous System—		
(a) Epilepsy ... ..	—	2
(b) Other... ..	—	2
Psychological—		
(a) Development ... ..	—	2
(b) Stability ... ..	—	4
Abdomen ... ..	1	1
Other ... ..	—	1

During the year there was an increase of 2,801 in the number of periodical medical inspections performed and a reduction of 2,661 in the number of special inspections and re-inspections as compared with 1959.

The table below shows the percentage of defects, newly found at routine medical inspection and recommended for treatment :—

	%		%
1953	12·4	1957	9·3
1954	10·7	1958	9·5
1955	9·7	1959	8·3
1956	9·7	1960	8·1

The percentage of defects requiring treatment found at routine medical examination shows a steady decline since 1953 from 12·4 to 8·1. However, even so a total of 2,860 individual pupils were found to require treatment as compared to 2,823 in the previous year—so that the system of periodic examinations still continues to serve a useful function. In addition it should be noted that a further 20,350 defects were noted as requiring continued observation although treatment was not immediately required.

The largest increases in the types of defects requiring observation were otitis media 1,074 (592 in 1959) and other ear conditions 466 (194 in 1959). Nose and throat conditions were 4,344 compared with 2,797 in 1959.

Table 2 (c)

Findings of Medical Inspections of Children examined under the experimental schemes.

Defects	For Treatment		For Observation		Total	
	1960	1959	1960	1959	1960	1959
Skin ... ..	7	11	16	32	23	43
Eyes:						
Defective Vision ...	53	31	83	91	136	122
Squint ... ..	9	4	11	14	20	18
Other conditions ...	1	2	5	12	6	14
Ears:						
Hearing ... ..	1	1	8	11	9	12
Otitis Media R. ...	1	1	6	15	7	16
Otitis Media L. ...	—	—	5	13	5	13
Other conditions ...	3	2	10	7	13	9
Nose and Throat...	8	9	104	92	112	101
Speech ... ..	—	3	11	16	11	19
Glands ... ..	2	—	30	22	32	22
Heart ... ..	1	1	19	11	20	12
Lungs ... ..	2	3	32	35	34	38
Development:						
Hernia ... ..	—	2	3	9	3	11
Other ... ..	1	1	32	24	33	25
Orthopaedic:						
Posture ... ..	—	1	8	14	8	15
Feet ... ..	3	3	7	11	10	14
Other conditions ...	3	4	26	34	29	38
Nervous System:						
Epilepsy ... ..	—	—	4	4	4	4
Other conditions ...	1	1	14	17	15	18
Psychological:						
Development ... ..	—	—	2	4	2	4
Stability ... ..	—	1	12	8	12	9
Abdomen ... ..	—	3	11	2	11	5
Miscellaneous ... ..	3	4	20	18	23	22
	99	88	479	516	578	604

The experiment whereby the intermediate routine medical inspection has been replaced in certain selected areas by visits to schools each term has been continued and extended in that more of the School Medical Officers' time has been allocated for the purpose. It can be seen from the figures in the table that slightly more defects requiring treatment have been found in the present year than in previous years but even so the number of defects found remains below that which have been discovered in similar schools examined by the system of routine inspections. However, many defects found at the routine inspections are of a very minor nature which do not require treatment and which clear spontaneously. With this point in view it is intended in the near future to do a routine examination in the schools served by the scheme to see whether any or many significant defects have been missed by the experimental method.

It should be recalled that the purpose of the scheme was to obviate the need for school medical officers to examine large numbers of normal children. It is relevant to note in this respect that of the 39,872 children examined at routine medical inspections 3,223 were found to need treatment and 20,350 defects were thought by the school medical officers to require observation—so that all in all over 50% of children were thought to require some attention, after the routine medical inspections. The table on page 16 shows that the percentage of children seen at routine medical inspections needing treatment has gradually declined over the years but since the number of defects varies little between entrant, intermediate or leavers inspections it appears difficult to say that one rather than the other could be omitted with advantage. Indeed it was notable that a recent recruit to the Staff from the ranks of general practice soon formed the view that a minimum of three routine inspections in each child's school life is an essential; and many Authorities have considered it necessary to add a fourth routine inspection i.e. in addition to the entrant and leaver examination, other examinations are held after entry to the junior and senior departments at 8 and 12 years. Abroad some Countries have an annual routine examination, but the



danger of boredom on the part of the examining medical officer should not be forgotten.

As was mentioned in last years report, the existing routine examinations have been supplemented by extension of the questionnaire system which seldom fails to find some minor deviation from normal in a child. This keeps the school medical officer's clinical interest at a high level and gives the parents the opportunity to discuss matters which otherwise might well have been overlooked.

The conscientious medical officer always maintains good liaison with Head Teachers in the area and whenever visiting a school asks to see any children about whom doubt may exist and the examination of such " specials " brought forward by parent or teacher is of the greatest value but they may not in fact find all the cases.

Thus its success depends so much on personal attitudes and relationships between the medical and teaching staffs. This apart the teaching staff of the County is well below establishment in many areas and many changes both of medical and teaching staffs occur. These are practical obstacles in achieving the necessary close contact.

Already the number of interruptions to the school resulting from medical visits for routine inspections, inoculation, B.C.G. vaccination, hygiene inspection, audiology, etc. cause difficulties to the teaching staff, so that one hesitates to increase this number.

Experience of selective medical examination has not proved so effective as the routine examinations elsewhere. This preliminary conclusion will be tested by reinstating routine examinations in some of the same schools and watching the results.

Table 3. Parents attending Periodic Medical Inspections

(1) <i>Age Group</i>	(2) <i>No. of children Examined</i>			(3) <i>No. of Parents Attended</i>			(4) <i>Col. 3 as % of Col. 2</i>		
	1958	1959	1960	1958	1959	1960	1958	1959	1960
Entrants	9,833	12,815	13,024	8,809	9,484	10,729	86.59	74.01	82.4
2nd Age Group	7,149	7,686	9,165	5,222	4,718	6,594	73.04	61.38	72.0
3rd Age Group	10,801	11,918	12,953	2,289	2,768	2,858	21.19	23.23	22.1
Other Periodic Inspections	2,872	4,652	4,730	1,765	2,776	2,199	61.45	59.67	46.5
TOTAL ...	30,655	37,071	39,872	18,085	19,746	22,380	60.00	53.27	56.1

		<i>No. of Children Examined</i>	<i>No. of Parents Attended</i>	<i>Percentage of Par- ents who Attended</i>
Entrants	{ 1956 and later	591	529	89.5
	{ 1955	6,911	5,649	81.7
	{ 1954	5,522	4,551	80.6
	{ 1953	1,257	965	76.8
	{ 1952	424	333	78.5
	{ 1951	243	157	65.4
Inter- mediates	{ 1950	3,569	2,373	66.5
	{ 1949	5,596	4,221	75.4
	{ 1948	2,413	1,541	63.8
	{ 1947	393	72	18.3
Leavers	{ 1946	4,035	1,119	27.7
	{ 1945 and earlier	8,918	1,739	17.2
Total ...		39,872	23,249	58.3

It is pleasing to note that the number of parents attending at the examination of the 3rd Age Group (leavers) has increased again, this year from 2,768 to 2,858.

The overall picture shows an improvement in the percentage of parents attending from 53 % to 58 %, the improvement being noted at both the entrant and 2nd routine inspection.

**Table 4. Ascertained of Handicapped Children during 1960**

<i>Category</i>						<i>No. of Children Ascertained</i>	
						1959	1960
Blind	...	...	...	...	...	4	2
Partially Sighted		...	...	...	...	3	3
Deaf	...	...	...	...	...	4	3
Partially Deaf	...	...	...	...	...	22	16
Delicate	...	...	...	...	...	35	34
Educationally Sub-Normal			...	...	...	213	277
Epileptic		...	...	...	...	40	49
Maladjusted	...	...	...	...	...	40	75
Physically Handicapped			...	...	...	203	209
						<hr/> 564 <hr/>	<hr/> 668 <hr/>

The table above does not include children living in the Excepted District of Newcastle. Almost all the children were examined at the school clinics.

**Table 5. Notification of Handicapped Pupils leaving school to the Youth Employment Service.**

No. of children who were advised not to take up certain types of employment ... ..	875
No. of children advised to register under the Disabled Persons (Employment) Act, 1944	11
	<hr/>
	886
	<hr/>

A report giving an indication of the type of work for which a child is suitable is issued for each child examined in the "leaver" group for the information of the Youth Employment Service.

The arrangement for consultation of the School Medical Officers by the Area Youth Employment Committees prior to committee meetings still continues. In difficult cases the Medical Officer may attend the Committee as an adviser.

It is pleasing to note that certain Youth Employment Officers have stated they have found the medical reports submitted to be most helpful in the correct placing of children. It is regrettable that so many children on leaving school have some type of handicap—albeit a minor one, but they are given effective help in making their way in life. The figures this year show an increase of 152 compared with 1959.

**Table 6. Miscellaneous Examinations**

<i>Type of Examination</i>	1958	1959	1960
Employment Licenses ... ..	1,631	1,246	1,485
Entrants to courses of training for Teachers ... ..	183	329	361
Entrants to the Teaching Profession ... ..	251	301	222
Superannuation ... ..	457	519	651
Children boarded out by the Children's Committee ...	379	328	349
Adventure Courses ... ..	—	—	276
	<hr/>	<hr/>	<hr/>
	2,901	2,723	3,344
	<hr/>	<hr/>	<hr/>



The number of these examinations has increased by 621 as compared with 1959. All of the examinations were carried out by School Medical Officers at the school clinics and they take up a good proportion of the time devoted to attendance at the clinics.

Of the 1,485 children who were examined for employment licences, as compared with 1,246 in 1959, none was refused a licence on account of unfitness.

The practice of arranging for children to be examined for fitness to attend school camps continued and over 2,300 children were seen in school clinics prior to going to camp. Only 14 minor defects were found and only one child's condition was really unsatisfactory. The child was already in the care of the family doctor. In view of the results and the time involved it has been decided not to conduct this kind of examination in future years and instead parents will be asked to certify, in writing, that their child is fit to go to camp and has not been in contact with infectious diseases.

For the first time senior scholars going on adventure courses were examined as the courses are strenuous involving up to 10—12 miles walking a day, or approximately 18 miles in 2 days, carrying 30 lbs. of kit, swimming and obstacle course work. The activities become progressively harder throughout the ten days and greatly benefit fit children who much enjoy the course.

Home Visiting

Table 7. Details of home visits made by Nursing Staff

<i>Reason for Visit</i>						<i>No. of Visits</i>
Cleanliness and verminous cases						3,405
Arising out of medical inspections						1,020
Arising out of inspection at clinics						711
All skin diseases						179
Aural:—Ears						422
Nose and throat conditions						1,141

[continued

*continued from previous page*

Ophthalmic defects	...	...	...	...	2,960
Orthopaedic defects	...	...	...	...	318
Educationally subnormal children	...	...	...	...	581
Neglected children	...	...	...	...	587
Infectious diseases	...	...	...	...	151
Heaf testing	...	...	...	...	109
National Survey (Health & Development)	...	...	...	...	50
Holiday visits to children home from special schools	...	...	...	...	508
Miscellaneous	...	...	...	...	1,919
Ineffectual visits	...	...	...	...	1,786
					<hr/> 15,847 <hr/>

There was a decrease of 2,665 in the number of home visits made by the nurses as compared with last year, but the number of ineffectual visits rose by 53.

The main decrease viz., 2,015, was in respect of visits for ophthalmic defects. This was due to a changed procedure being adopted by some of the ophthalmic surgeons, whereby mydriasis was undertaken at the clinics on the day of the child's attendance, instead of atropine ointment being instilled by the nurses at the children's homes on the two days immediately prior to the children's attendance at the clinic.

The visitation of children in their homes is an important part of the school nurse's work, for by this it is ensured that children obtain treatment which has been recommended by the medical officer.

## Details of visits made by Nursing Staff to schools

<i>Reason for Visit</i>	<i>No. of Visits</i>
Ophthalmic Cases :—	
General ... ..	1,939
To administer atropine ... ..	1,008
Vision testing prior to	
Medical inspection ... ..	861
Attendance at Ophthalmic Clinic ...	625
Infectious Diseases ... ..	78
Hygiene inspections ... ..	3,702
Miscellaneous ... ..	407
	<hr/>
	8,620
	<hr/>

It will be seen from these figures that the nurses are required to devote a considerable amount of time to work at the schools and that the majority of the visits are in connection with ophthalmic cases, 1,633 being for the preparation of the children's eyes for testing and in an endeavour to ensure the children's attendances at the clinics with the co-operation of the head teachers of the schools. The nurses make routine visits to schools each term to supervise the cleanliness of the children and supervise their general hygienic condition. A fuller report in this connection is given on page 81.

In addition the nurses attend with the School Medical Officers to assist at routine medical inspections.

## PART II—TREATMENT

**Table 8. Details of treatment given**

### *Diseases of the Skin*

					<i>No. of cases treated or under treatment during the year</i>
					<i>By the Authority</i>
Ringworm—(i) Scalp	...	...	...	...	6
(ii) Body	...	...	...	...	71
Scabies	...	...	...	...	30
Impetigo	...	...	...	...	105
Other Skin Diseases	...	...	...	...	2,177
Total					2,389

### *Eye Diseases, Defective Vision and Squint*

		<i>Number of cases dealt with</i>	
		<i>By the Authority</i>	<i>Otherwise (Hospital, etc.)</i>
External and other, excluding errors of refraction and squint		589	48
Errors of refraction (incl. squint)		2,026	68
Total		2,615	116
Number of pupils for whom spectacles were prescribed		5,306	234



## *Diseases and Defects of Ear, Nose and Throat*

Received operative treatment ...	
(a) for diseases of the ear ...	—
(b) for adenoids and chronic tonsillitis ... ..	1,931
(c) for other nose and throat conditions ... ..	39
Received other forms of treat- ment ... ..	1,125
	<hr/>
Total ... ..	3,095
	<hr/>

Total number of pupils in schools who are known to have been provided with hearing aids	
(a) in 1960 ... ..	20
(b) in previous years ...	104

## *Orthopaedic and Postural Defects*

Number treated as in-patients in hospitals ... ..	158
Number treated otherwise, <i>e.g.</i> in clinics or out-patient de- partments ... ..	428
	<hr/>
	586
	<hr/>

## *Child Guidance Treatment*

Number of pupils treated at Child Guidance Clinics ...	49
---	----

### *Speech Therapy*

Number of pupils treated by Speech Therapists ... ..	677
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### *Other Treatment Given*

Miscellaneous minor ailments...	346
Respiratory defects ... ..	436
Injuries ... ..	2,474
Debility and malnutrition ...	367
Infectious diseases ... ..	178
Other ... ..	1,330
Abdominal defects ... ..	444
<hr/>	
Total ... ..	5,575

Pupils who received convalescent treatment under School Health Service arrangements	364
Pupils who received B.C.G. Vaccination ... ..	8,838
<hr/>	
	9,202
<hr/>	

# COUNTY CLINICS

Table 9.

## SCHOOL HEALTH SERVICE CLINICS

(Less the Excepted District of the Borough of Newcastle)

as at 31-12-60

Name of Clinic	Address	Minor Ailments Clinic held	Dental Clinic held	Ophthalmic Clinic held	Speech Therapy Clinic held	Remedial Exercises Clinic held
Aldridge	Leighswood Road (Tel. 52088)	9-0—10-30 Wed. weekly	—	9-30—12-30 Thursday	9-30—4-30 Thursday	9-30—12-30 Fris. weekly
Ashley	Memorial Hall	2-0—2-30 Tues. fortnightly	—	—	—	—
Audley	District Council Office (Tel. 203)	2-0—2-30 Tues. weekly	—	9-30—12-30 Tues. every 6—8 weeks	—	—
Baddeley Green	Leek Road Milton	—	—	9-30—12-30 Tues. every 6—8 weeks	—	—
Barton-under-Needwood	Central Hall	2-0—2-30 Tues. fortnightly	—	—	—	—
Biddulph	Princes Street (Tel. 2040)	9-0—10-30 Fri. every 2nd and 4th in month	9-0—12-30 1st in month	9-30—12-30 Fri. every 3rd and 5th in the month	—	—
Bilston	† Central Health Clinic (Tel. 41527)	9-0—10-30 Daily inc. Sat.	Daily 9-0—5-0	1-30—4-0 Tues. weekly	9-30—12-0 Mons. and Weds. weekly 9-30—4-30 Thurs.	2-0—5-0
Brewood	Dr. Cheshire's Surgery Sandy Lane (Tel. 206)	9-0—10-30 Wed. fortnightly	—	9-30—12-30 Tues. every three months	—	—
Brierley Hill	Fairview, Church Hill (Tel. 77555)	9-0—10-30 Tues. weekly	*	9-30—5-0 Mon. weekly	—	—
Bilbrook	Lane Green C.P. School (Tel. Codsall 384)	9-0—10-30 Tues. fortnightly	—	—	—	2-0—5-0 Mon. weekly

<i>Name of Clinic</i>	<i>Address</i>	<i>Minor Ailments Clinic held</i>	<i>Dental Clinic held</i>	<i>Ophthalmic Clinic held</i>	<i>Speech Therapy Clinic held</i>	<i>Remedial Exercises Clinic held</i>
Brownhills	Pier Street (Tel. 2219)	9-0—10-30 Tues. fortnightly	—	—	9-30—12-0 Mondays	—
Cannock	† (1) Health Department, Church Street (Tel. 2096)	9-0—10-30 Mon. and Thurs. wkly.	—	2-0—4-0 Friday weekly	—	†
	(2) Arthur Street, Chadsmoor (Tel. Can. 2347)	9-0—10-30 Mon. and Weds. wkly. 2-0—4-0 Friday weekly	Daily 9-0—5-0	—	9-30—12-0 Thurs. weekly	—
	(3) St. John's Institute, Hednesford Rd., Heath Hayes	10-45—12-0 Mon. weekly	—	—	—	—
	(4) Cannock Rd., Hednesford (Tel. Hed. 228)	9-0—10-30 Wed. and Fri. weekly	—	—	—	—
Chasetown	Youth Centre, Sankey's Corner	9-0—10-30 Tues. weekly	—	—	—	—
Cheadle	Carlos Memorial Institute	9-0—10-30 Tues. weekly	—	9-30—12-30 Thurs. every 2 weeks	—	—
Cheddleton	Parish Institute	1-30—2-0 Fri. fortnightly	—	—	—	—
Cheslyn Hay	Junior School	9-0—10-30 Mon. fortnightly	—	—	—	—
Coseley	Bayer Hall (Tel. Sedgley 2306)	9-0—10-30 Mon. Wed. and Fri.	—	9-30—5-0 Mondays	—	9-0—12-0 Thurs. weekly
Darlaston	The Flatts Victoria Road	9-0—10-30 Mon. and Thurs. weekly	—	9-30—5-0 Tues.	—	—



<i>Name of Clinic</i>	<i>Address</i>	<i>Minor Ailments Clinic held</i>	<i>Dental Clinic held</i>	<i>Ophthalmic Clinic held</i>	<i>Speech Therapy Clinic held</i>	<i>Remedial Exercises Clinic held</i>
Eccleshall	Methodist School	9-0—9-30 Fri. fortnightly 2—2-30	—	—	—	—
Essington	Methodist School	Wed. fortnightly 9-0—10-30	—	—	—	—
Featherstone	United Methodist Chapel	Fri. weekly 1-30—2-0	—	9-30—12-30 Tues. every 6 to 8 wks.	—	—
Gnosall	N. County Sec. School (Tel. 391)	Wed. weekly 9-0—10-30	—	—	—	—
Great Wyrley	(1) Great Wyrley Junior School (2) The Hutments No. 1 Walsall Road	Wed. fortnightly 10-30—12 Wed. fortnightly	—	1.30—5-0 Tues. every 6—8 weeks	—	—
Halmerend	Primitive Methodist School, High Street	1-30—2-0 Wed. fortnightly	—	—	—	—
Harriseahead	Wesleyan Sunday School High Street	2-0—2-30 Tues. fortnightly	—	—	—	—
Huntington	Cty. Sec. Mod. School, Huntington	9-0—10-30 Thurs. fortnightly	—	—	—	—
Kidsgrove	Day Nursery Liverpool Road (Tel. 2289)	9-0—10-30 Mon. fortnightly	—	9-30—12-30 Tues. and Wed. alternate weeks	9-30—4-30 Fridays	—
Kingswinford	High Street (Tel. 4940)	9-30—10-30 Tues. fortnightly	—	—	—	—
Kinver	Constitutional Club, High Street	9-0—10-30 Fri. fortnightly	—	(proposed for 1961)	—	—
Leek	(1) Cripples' Aid Society Clinic, Salisbury Street (Tel. 1313) (2) Alsop Street (Tel. 110)	9-0—10-30 Mon., Thurs. and Fri.	—	9-30—5-0 Wed. fortnightly	9-30—12-0 Tues. weekly	† Mons., Weds Fri. (R.H.B. Clinic)
Lichfield	(1) Sandford Street (Tel. 2246) ‡ (2) Red Court House Tamworth Street (Tel. 3656) Bull Street Tel. Dudley 53175	9-0—10-30 Wed. fortnightly 9-0—10-30 Fri. fortnightly	9-0—5-0 except Sats. *	—	—	—
Lower Gornal				9-30—12-30 Fri. weekly and Thurs. every 3 weeks	9.30—12-30 Mons. 2-0—5-0 2-0—4-30 Thurs. Mon. weekly weekly	—

<i>Name of Clinic</i>	<i>Address</i>	<i>Minor Ailments Clinic held</i>	<i>Dental Clinic held</i>	<i>Ophthalmic Clinic held</i>	<i>Speech Therapy Clinic held</i>	<i>Remedial Exercises Clinic held</i>
Madeley	Village Hall	9-0—10-30 Thurs. fortnightly	—	9-30—12-30 Tues. every 3 months.	—	—
Norton Canes	Trinity Methodist Church Brownhills Road	10-45—12-0 Mon. fortnightly	—	—	—	—
Pelsall	Central Hall	9-0—10-30 Mon. weekly	—	—	—	—
Penkridge	Dr. McCollum's Surgery St Michaels Road (Tel Penk 300)	9-0—10-30 Thurs. fortnightly	—	—	—	—
Pheasey Estate	‡ (1) 2, Crome Road	9—10-30 Tues. weekly	—	9-30—12-30 Thurs. every 3 weeks	—	—
Quarry Bank	(2) County Primary School Mount Pleasant	9-0—10-30 Mon. fortnightly	*	—	—	—
Rowley Regis	‡ (1) Carlyle Road, Blackheath (Tel. Bla. Heath 1334)	9-0—10-30 Mon. fortnightly	*	2-0—4-0 2nd and 4th Tues. in month	—	—
	‡ (2) Mace Street, Old Hill (Tel. Crad. Hea. 66806)	9-0—10-30 Tues. weekly and Thurs. fortnightly	*	2-0—4-0 1st and 3rd Tues. in month	—	9-0—12-0 Tues. weekly
	‡ (3) Elm Terrace Tivdale Hall Estate Nr. Dudley (Tel. Dudley 54979)	Mon. fortnightly	*	—	—	—
	(4) Methodist School Room Springfield (Tel. Bla. Hea. 1333)	2-0—2-30 Thurs. fortnightly	—	—	—	—
Rugeley	‡ Congregational Sunday School, Heron Court	9-0—10-30 Mon. weekly	9-0—12-30 Tues. weekly	1-45—4-45 Wed. weekly	9-30—12-0 Thurs. weekly	9-0—12-0 Mon. weekly
Sedgley	(1) Bleak House (Tel. Sedgley 2192)	9-0—10-30 Tues. fortnightly	—	2-0—5-0 Mon. weekly	—	—
	(2) Quadrant (Tel. 3048)	Wed. fortnightly	*	—	9-30—12-0 Tues. weekly	2-0—5-0 Fri. weekly
Shelfield	Coal Heath Lane off Lichfield Road (Tel. Pelsall 279)	9-0—10-30 Thurs. fortnightly	—	9-30—12-30 Wed. weekly	9-30—12-0 Tues. and Fri.	1-30—4-30 Fri. weekly
Short Heath	Pools Lane	9-0—10-30 Fri. weekly	9-0—5-0 Daily	—	9-30 to 4-30 Mondays	—

Name of Clinic	Address	Minor Ailments Clinic held	Dental Clinic held	Ophthalmic Clinic held	Speech Therapy Clinic held	Remedial Exercises
						Clinic held
Stafford	‡ (1) Lammascote Road (Tel. 3950)	9-0—10-30 Daily inc. Sat.	9-0—5-0 Daily except Sat.	9-30—5-0 Tues. fortnightly	—	9-0—5-0 Thurs. weekly
	(2) North Walls (Tel. 2301)	—	—	—	1-30—4-30 Mons. 2-0—5-0 9-30—4-30 Weds. Tues. weekly 1-30—4-30 Fris.	2-0—5-0 Tues. weekly
	(3) Rising Brook (Tel. 3372)	9-0—10-30 Thurs. weekly	—	9-30—12-30 Wed. fortnightly	9-30—4-30 Wednesday	9-0—12-0 Tues. weekly
Stone	(1) St. Michael's Hall	9-0—10-30 Thurs. weekly	—	9-30—12-30 Tues. every 2—3 months	—	—
Talke	(2) Kitchener Institute Cross House	—	*	—	—	—
Tamworth	School of Industry Marmion Street (Tel. 197)	9-0—10-30 Thurs. every 4th week 9-0—10-30 Thurs. weekly	*	9-30—12-30 Tues. weekly	—	—
Tettenhall	U.D.C. Offices, Upper Green (Tel. 51536)	9-0—10-30 Thurs. fortnightly	—	9-30—12-30 Wed. weekly	1-30—4-30 Mons. and Weds.	9-0—12 Mon. 2-0—5-0 Tues. wkly. in School Holidays 2-0—5-0 Thurs. 9-0—12-0 Fri. weekly
Tipton	‡ (1) Central Clinic, Horseley Rd. (Tel. 1949)	9-0—10-30 daily incl. Sat.	—	10-0—12-30 Tues. weekly	—	—
	(2) Princes End Junior Mixed and Infants' School	9-0—10-30 Mon. and Thurs. weekly	—	—	—	—
	(3) Birch Street	9-0—10-30 Tues. weekly	—	—	—	—
Tutbury	(1) Methodist Sunday School	1-30—2-0 Fri. fortnightly	—	—	—	—
	(2) Tutbury Institute	—	—	2-0—5-0 Tues. every 3 mths.	—	—
Uttoxeter	Heath House (Tel. 555)	9-0—10-30 Fri. weekly	*	2-0—5-0 Tues. fortnightly 9-30—12-30 Thurs. every 3 weeks	9-30—12-30 Tues. weekly	9-0—5-0 Wed. weekly
Walsall Wood	Primitive Methodist School, Lichfield Road	9-0—10-30 Wed. fortnightly	—	—	—	—
Wednesbury	(1) Technical School, Albert Street (Tel. 0215)	9-0—10-30 Mon. and Fri weekly	—	—	—	—
	(2) King's Hill (Tel. James Bridge 2987)	9-0—10-30 Tues. and Fri. weekly	—	—	—	9-0—12-0 Wed. weekly
	‡ (3) Mesty Croft (Tel. 0020)	9-0—10-30 Mons. weekly	—	—	—	—

<i>Name of Clinic</i>	<i>Address</i>	<i>Minor Ailments Clinic held</i>	<i>Dental Clinic held</i>	<i>Ophthalmic Clinic held</i>	<i>Speech Therapy Clinic held</i>	<i>Remedial Exercises Clinic held</i>
Wednesfield	(1) Alfred Squire Road (Tel. W'ton 32382) N. (2) Wards Bridge Sec. Mixed School (Tel. W'ton 32408) (3) 49 Olinthus Avenue	9-0—10-30 Tues. weekly 9-0—10-30 Tues. weekly —	— — —	— — 9-30—12-30 Mons. weekly —	9-30—12-0 Fri. — — —	— — — —
Werrington	Village School Hall	2-0—2-30 Fri. fortnightly	—	—	—	—
Weston Coyney	Community Centre (Tel. Longton 32580)	2-0—3-30 Thurs. fortnightly	—	9-30—12-30 Thurs. every 3 months	9-30—4-30 Weds.	—
Willenhall	† Nurses Home, Walsall Road (Tel. 638)	9-0—10-30 Mon. and Fri. weekly	—	9-30—12-30 Thurs. weekly —	—	—
Wombourne	Mill Lane	9-0—10-30 Tues. fortnightly	—	—	—	—
Wordsley	Primitive Methodist Sunday School	9-0—10-30 Mon. fortnightly	—	—	—	—

\* Dental Clinics are also held on these premises as and when necessary.

† An Orthopaedic and Physiotherapy Clinic is also held daily from 9-0—5-0 except Saturday

‡ Ultra Violet Light Clinics held on these premises once or twice weekly.

N. No. Doctor. Nurse only in attendance at M.A.C.



**Minor Ailments Clinics**

		1957	1958	1959	1960
No. of Clinics	...	66	67	70	71
No. of first visits	...	9,405	8,090	7,754	7,704
No. of re-visits	...	27,118	20,394	18,174	18,335

The number of defects found in children attending the clinics for treatment of minor ailments was 7,780 compared with 7,812 in 1959. The medical officers were also employed in the ascertainment and “follow-up” examinations of handicapped children and by the miscellaneous examinations shown in Table 6 on page 22.

**Table 10. Diseases and Defects found at Minor Ailment Clinics**

<i>Disease or Defect</i>					<i>No. of Cases</i>
Defective vision	...	...	...	...	836
Squint	...	...	...	...	17
Blepharitis	...	...	...	...	76
Conjunctivitis...	...	...	...	...	125
Styes	...	...	...	...	169
Other eye defects	...	...	...	...	219
Enlarged tonsils and/or adenoids	...	...	...	...	152
Other defects of nose and throat	...	...	...	...	101
Defective hearing	...	...	...	...	35
Otitis media	...	...	...	...	87
Other defects of ears...	...	...	...	...	149
Speech defects	...	...	...	...	74
Cough or catarrh	...	...	...	...	123
Bronchitis	...	...	...	...	85
Asthma	...	...	...	...	30
Ringworm—Scalp	...	...	...	...	6
Body	...	...	...	...	71
Scabies	...	...	...	...	30
Impetigo	...	...	...	...	105

Septic sores ... ..	534
Warts—General ... ..	232
Plantar ... ..	710
Boils ... ..	253
Other skin defects ... ..	448
Major injuries (including fractures) ...	43
Burns ... ..	122
Sprains or strains ... ..	356
Other minor injuries ... ..	1,681
Heart conditions ... ..	25
Rheumatic conditions ... ..	26
Debility and malnutrition ... ..	367
T.B. Glands—Cervical ... ..	4
Abdominal ... ..	1
Posture ... ..	34
Flat feet ... ..	51
Other orthopaedic defects ... ..	57
Other defects ... ..	346
	<hr/>
	7,780
	<hr/>

### Bilston Foot Clinic

No. of new cases of plantar warts ...	311
No. of treatments ... ..	1,982
No. of sessions ... ..	56

### Ophthalmic Clinics

**Table 11. Visual and External Eye Defects**

	1958	1959	1960
No. of children examined ...	9,840	9,873	10,350
No. of children attending for			
the first time ... ..	2,525	2,589	2,671
No. of re-visits ... ..	7,315	7,284	7,679
Analysis of major defects found among new cases:—			

#### *Errors of Refraction :—*

Hypermetropia ... ..	276
Hypermetropic astigmatism ... ..	292
Compound hypermetropic astigmatism ... ..	128
Myopia ... ..	614
Myopic astigmatism ... ..	121
Compound myopic astigmatism ... ..	144
Mixed astigmatism ... ..	93
Anisometropia ... ..	358

*Diseases and abnormalities:—*

*Lids and conjunctiva:—*

Blepharitis	...	...	...	...	...	...	14
Ptosis	...	...	...	...	...	...	2
Diplopia	...	...	...	...	...	...	1
Conjunctivitis	...	...	...	...	...	...	1
Angular conjunctivitis	...	...	...	...	...	...	2
Epicanthus	...	...	...	...	...	...	6
Amblyopia	...	...	...	...	...	...	37
Contusion of lids	...	...	...	...	...	...	4

*Cornea:—*

Corneal scars	...	...	...	...	...	...	4
Phlyctenular Keratitis	...	...	...	...	...	...	1

*Uvea:—*

Albinism	...	...	...	...	...	...	1
Ciliary spasm	...	...	...	...	...	...	1

*Lens:—*

Cataract	...	...	...	...	...	...	1
Posterior polar cataract	...	...	...	...	...	...	1
Lamellar cataract	...	...	...	...	...	...	1
Bilateral subluxation of lens	...	...	...	...	...	...	1
Traumatic lenticular opacity	...	...	...	...	...	...	1

*Retina:—*

Central choroidal atrophy	...	...	...	...	...	...	1
Congenital coloboma of iris and choroid	...	...	...	...	...	...	1
Macular choroiditis	...	...	...	...	...	...	1
Detachment of retina traumatic	...	...	...	...	...	...	2
Coloboma of choroid	...	...	...	...	...	...	2

*Nerves:—*

Optic atrophy	...	...	...	...	...	...	1
---------------	-----	-----	-----	-----	-----	-----	---

*Muscles:—*

Nystagmus	...	...	...	...	...	...	3
Strabismus	...	...	...	...	...	...	240
Duane's syndrome	...	...	...	...	...	...	1
Exophoria	...	...	...	...	...	...	5

*Others:—*

Migraine	...	...	...	...	...	...	1
Shrunken Globe	...	...	...	...	...	...	1
Frolichs Syndrome	...	...	...	...	...	...	1

The total number of children examined was 477 more than in the previous year and the figures similarly increased for the first examinations and re-examinations—an increase of 82 in the former and 395 in the latter.

The staff has worked continually throughout the year but there are still one or two clinics which have large waiting lists.

The system has continued whereby a school nurse is engaged whole time in testing the vision of the 8 year age group, 12,106 children were examined, 1,013 were found to have defective vision of whom 489 were already under treatment and supervision. All the 524 newly found cases were offered examination under School Health Service arrangements. The School Medical Officers are also encouraged to perform vision tests at the routine examinations of those school entrants who are able to co-operate.

To the 764 old cases of squint were added 236 children newly found to be suffering from squint and a number were referred to various hospitals for orthoptic treatment or operation. Details of the orthoptic cases are given on page 54.

During the year the index of children under observation on account of defective vision was examined and the following information extracted, relating to total known cases of myopia which, in England, is now the commonest cause of blindness in persons under 35 years of age.

The number of children found during the year to be suffering from myopia was 614, 9 less than in 1959. Very few of these cases had the disease in the progressive state and all were kept under frequent supervision.



## Myopia

Year of Birth			Boys	Girls	Total
1942	...	...	—	1	1
43	...	...	205	269	474
44	...	...	195	334	529
45	...	...	209	289	498
46	...	...	208	275	483
47	...	...	216	247	463
48	...	...	207	215	422
49	...	...	169	185	354
50	...	...	103	120	223
51	...	...	89	78	167
52	...	...	70	51	121
53	...	...	26	19	45
54	...	...	16	19	35
55	...	...	5	7	12
56	...	...	3	—	3
57	...	...	—	1	1
			1,721	2,110	3,831

## Cannock Orthopaedic Clinic

**Table 12. Statistics for 1960**

No. on register at end of December, 1960	...	116
No. of new cases	... ..	40
No. of children discharged cured	... ..	27
No. of cases lost sight of, etc.	... ..	20
No. of attendances for physiotherapy	... ..	2,002
No. of attendances for ultra violet light treatment		884
No. of examinations by Orthopaedic Surgeon	...	194

**Table 13. Defects treated during 1960—Cannock Clinic**

Anterior poliomyelitis	...	...	...	...	8
Hemiplegia	...	...	...	...	1
Scoliosis	...	...	...	...	2
Kyphosis	...	...	...	...	6
Slack back	...	...	...	...	7
Genu valgus	...	...	...	...	21
Genu varum	...	...	...	...	1
Hallux valgus	...	...	...	...	4
Flat feet	...	...	...	...	51
Pes cavus	...	...	...	...	2
Hammer toes	...	...	...	...	8
Talipes equino varus...	...	...	...	...	10
Talipes calcaneo valgus	...	...	...	...	3
Dislocation of hip	...	...	...	...	1
Torticollis	...	...	...	...	1
Short leg	...	...	...	...	1
Spastic...	...	...	...	...	3
Exostosis os calcis	...	...	...	...	1
T.B. Hip	...	...	...	...	1
Other conditions	...	...	...	...	4
					136

### **Remedial Exercise Clinics**

There was no extension of this service during 1960 as envisaged in the report of 1959 as it was not possible to obtain the services of another Physiotherapist.

There was a slight reduction in the number of children referred for treatment, 320 in 1959 and 277 in 1960 but the number of treatments increased from 4,498 in 1959 to 4,872 in 1960.

At the commencement of the Spring Term a re-adjustment of a physiotherapist's programme enabled one weekly session to be held at the High Arcal Special School. 15 children under treatment there received 360 periods of treatment. Nine children had postural defects and six children had exercises for leg and foot defects.

Resulting from the re-arrangement of the physiotherapist's programme it was also possible in June to open a remedial exercise Clinic at Aldridge for one session per week.

The following table shows the work which has been carried out :—

**Table 14. Treatment at Remedial Exercises Clinics**

<i>Clinic</i>	<i>No. of children referred</i>	<i>No. of children whose treatment was completed</i>	<i>No. of children discharged</i>	<i>No. of children under treatment 31.12. 60</i>	<i>No. of treatments given</i>
Aldridge ... ..	8	2	2	4	68
Bilbrook ... ..	6	4	1	9	273
Bilston ... ..	9	13	17	15	449
Coseley ... ..	5	5	3	7	195
Lichfield ... ..	16	7	4	10	107
Rugeley ... ..	13	11	8	4	233
Sedgley ... ..	5	15	12	16	434
Shelfield ... ..	30	24	10	10	316
Stafford (3) ... ..	87	57	23	32	850
Tettenhall ... ..	10	12	4	6	173
Tipton ... ..	15	17	18	20	496
Tividale ... ..	12	11	6	11	253
Uttoxeter ... ..	42	29	8	17	534
Wednesbury ... ..	19	10	10	17	491
	<u>277</u>	<u>217</u>	<u>126</u>	<u>178</u>	<u>4,872</u>

One hundred and five children were discharged from the clinics because of unsatisfactory attendance. Their homes were visited by the school nurses with a view to persuading parents to agree to the resumption of treatment. The twenty-one other children were discharged on removing from the area, lost sight of, etc.

The following table shows the main defects which were being treated at the end of the year.

		<i>Posture</i>	<i>Breathing Exercises</i>	<i>Defects of Legs &amp; Feet</i>	<i>Others</i>
Aldridge	...	—	3	1	—
Bilbrook	...	3	5	1	—
Bilston	...	3	6	6	—
Coseley	...	4	3	—	—
Lichfield	...	2	5	3	—
Rugeley	...	1	1	1	1
Sedgley	...	3	6	7	—
Shelfield	...	1	3	5	1
Stafford	...	6	6	17	3
Tettenhall	...	3	2	1	—
Tipton	...	1	5	14	—
Tividale	...	7	4	—	—
Uttoxeter	...	2	6	6	3
Wednesbury	...	8	7	1	1
		<u>44</u>	<u>62</u>	<u>63</u>	<u>9</u>



## Ear, Nose and Throat

The two part time County Ear, Nose and Throat Consultants continued to see children suspected of hearing defects at the County Ear, Nose and Throat Clinics and 336 children were subsequently referred during the year to hospitals nearest to their homes for tonsillectomy, adenoidectomy, investigation of sinus conditions and other defects needing treatment.

In addition, 275 children with enlarged tonsils and adenoids were considered by the school medical officers to require treatment and were referred to hospital after notification had been sent to the private practitioner.

A total of 611 children were referred to hospital, a slight increase over 1959.

126 clinic sessions were held during the year—an increase of 17 over 1959. 10 sessions were carried out at Needwood School and 8 sessions were devoted to Stafford Diagnostic Clinic.

2,018 cases were referred for examination against 2,052 in the previous year. 1,547 children were examined and of these 809 were found to have significant defects. Out of this number 336 were referred to hospital for treatment, the majority of whom were suffering from enlarged tonsils and/or adenoids or required investigation of sinus infection. Those who needed non-operative treatment were referred to their own doctor.

There were 134 children found to be suffering from a degree of deafness, but in the majority of cases the loss of hearing did not call for education in a special school. Arrangements were made in appropriate cases for the provision of a hearing aid and/or a seat in a favourable position in the front of the class at school.

Of the more severe cases of deafness, 23 were recommended for admission to special schools—(12 for Needwood, 7 for the Braidwood School, Birmingham, three for the Mount School, Stoke-on-Trent, one for the Royal School for the Deaf, Derby, and one for the Dockray Nursery Unit of the Royal Residential School for the Deaf, Manchester.

Four boys of pre-school age were referred to the Auditory Diagnostic and Training Clinic established by the Birmingham City Council.



Mr. Paterson has continued to examine children referred by outside education authorities for placement at Needwood Special School for the partially deaf. Thirty-one such examinations were carried out during the year.

The following tables give details of the work which has been carried out at the various ear, nose and throat clinics during the year.

Table 15. Summary of Statistics relating to Ear, Nose and Throat Clinics

Clinic	No. of Sessions	No. of children referred for examination	No. of children who did not attend	No. of children found to have defects	No. of children referred to Hospital	No. of children not needing treatment or observation
Biddulph ...	1	16	2	5	2	9
Bilston ...	17	276	65	104	49	107
Brewood ...	1	12	1	6	3	5
Brierley Hill ...	11	172	41	72	27	59
Cannock ...	10	159	30	88	37	41
Cheadle ...	1	18	2	9	3	7
Kidsgrove ...	3	43	14	12	3	17
Leek ...	3	55	13	25	12	17
Lichfield ...	3	42	7	17	9	18
Penkridge ...	1	15	3	5	1	7
Pheasey ...	2	28	4	9	6	15
Rowley Regis ...	8	127	35	42	21	50
Rugeley ...	1	20	5	8	2	7
Sedgley ...	7	93	18	27	13	48
Shelfield ...	8	132	40	59	25	33
Stafford ...	15	249	70	72	27	107
Tamworth ...	1	17	5	6	3	6
Tettenhall ...	6	95	17	37	10	41
Tipton ...	12	200	59	82	36	59
Tutbury ...	2	29	6	13	8	10
Uttoxeter ...	2	27	1	13	6	13
Wednesbury ...	11	193	33	98	33	62
	126	2,018	471	809	336	738

**Table 16. Analysis of defects found at Ear, Nose and Throat  
Consultant Clinics**

Tonsils and/or adenoids	...	...	...	...	259
Catarrhal otitis media	...	...	...	...	116
Chronic otitis media	...	...	...	...	82
Radical mastoid	...	...	...	...	1
Healed suppurative otitis media			...	...	22
External otitis and aural polypi	...	...	...	...	7
Congenital deformity of ear	...	...	...	...	1
Deafness	...	...	...	...	132
Sinus investigation	...	...	...	...	52
Rhinitis	...	...	...	...	2
Epistaxis	...	...	...	...	5
Wax	...	...	...	...	66
Speech defect	...	...	...	...	4
Mouth breather	...	...	...	...	5
Cleft palate	...	...	...	...	2
Dental defects	...	...	...	...	4
Deflected nasal septum	...	...	...	...	3
Observation	...	...	...	...	46
					<hr/> 809 <hr/>

### **Audiometric Survey**

Until the end of the Spring Term the Audiometric team continued to test the hearing of children of 8 years of age, i.e. those born in 1952, after which the survey was switched to the 6 year age group at the suggestion of the Ministry of Education. Children of various ages, who were presented by head teachers because of a suspicion that hearing was defective, continued to be seen.

The following table shows the number of children who were examined and the number whose hearing was found to be abnormal.

	<i>No.</i> <i>examined</i>	<i>No. with</i> <i>abnormal</i> <i>hearing</i>	<i>% with</i> <i>abnormal</i> <i>hearing</i>
Children of 8 years of age...	3,506	262	7.47 %
Absentees in 1959 ... ..	353	32	9.06 %
Children of 6 years of age...	6,451	402	6.23 %
Children of various ages presented by teachers ...	323	119	36.84 %
	<hr/> 10,633 <hr/>	<hr/> 815 <hr/>	

Number of schools visited ... .. 420

In addition, there has been a re-test of 321 children who it has been considered advisable to keep under supervision. Of these 162 were still found to have a loss of hearing and arrangements will be made for them to be examined by one of the County Ear, Nose and Throat Consultants.

There were 1,642 children absent from school at the time of the audiometrician's visit and arrangements will be made for them to be tested during 1961.

The children found by the audiometrician to have defective hearing, 815 in number, were referred for examination by the County Ear, Nose and Throat Consultants and during the year it was possible to make appointments for 810 of them at the various clinics. 358 of that number were found to require treatment.

**Table 17. Analysis of Cases of Suspected Deafness referred to County Ear, Nose and Throat Consultants from Audiometric Survey.**

*Deafness Confirmed*

*A. Remediable:*

Deafness due to wax...	...	...	...	50
Catarrhal deafness following infection	...			14
				<hr/> 64

*B. Probably Permanent:*

Congenital malformation of ear	...			1
Deafness due to congenital, nerve and mixed causation (of varying degrees of severity)	...	...	...	57
				<hr/> 58

*Conditions other than Deafness*

*A. Infective:*

Tonsils and/or adenoids	...	...	...	63
Catarrhal otitis media	...	...	...	69
Chronic otitis media	...	...	...	50
Healed suppurative otitis media	...	...	...	21
Acute suppurative otitis media	...	...	...	2
External otitis and aural polypi	...	...	...	7
Radical mastoid	...	...	...	1
Sinus infection	...	...	...	9
				<hr/> 222

*B. Non-Infective:*

Mouth breather	...	...	...	3
Speech defects	...	...	...	1
Unco-operative	...	...	...	4
Epistaxis	...	...	...	2
Rhinitis	...	...	...	1
Foreign body	...	...	...	1
Injury to ear	...	...	...	1
Cleft palate	...	...	...	1
				<hr/> 14



The children in the “Probably Permanent Deafness” group were suffering from defects most of which could be assisted by the provision of a hearing aid. In the group of Infective Conditions, the vast majority can be cured or improved by early medical treatment but, in the absence of this, permanent loss of hearing might develop.

The 50 children with wax in their ears had some degree of deafness which constituted a handicap until the wax was removed.

### **Child Guidance Clinics**

A fresh start to provide a child guidance service was made during the year.

Dr. Pedley Baker who was appointed on a part time basis in April, has been giving 3 sessions per week at Bilston with the help of an Educational Psychologist.

In May Dr. W. Johnson was appointed Principal Medical Officer for Mental Health and has commenced seeing a limited number of cases in Lichfield and Stafford. This service will be extended as staffing conditions permit.

Between them Dr. Johnson and Dr. Pedley Baker had seen 114 children at 154 Clinic sessions by the end of the year.

During the year eight children were referred to other Authorities for child guidance as follows:—

Stoke-on-Trent	...	...	1
West Bromwich	...	...	4
Wolverhampton	...	...	3

## Speech Therapy Clinics

**Table 18. Summary of Statistics relating to children attending County and other Clinics during the year**

<i>County Clinics</i>	<i>No. of treatments given</i>	<i>No. of children under treatment at 31.12.60</i>	<i>No. of children awaiting treatment at 31.12.60</i>	<i>No. of new cases during the year</i>	<i>No. of children discharged during the year</i>
Aldridge ...	73	12	—	26	7
Bilbrook ...	68	—	13*	3	4
Bilston ...	275	24	31	88	31
Blackheath ...	178	—	21*	2	3
Brownhills ...	82	8	5	26	7
Chadsmoor ...	284	8	7	20	18
Cheadle ...	—	—	—	—	—
Kidsgrove ...	75	10	10	28	5
Kingswinford ...	75	—	32*	10	14
Leek ...	249	17	15	32	31
Lichfield ...	335	14	2	26	29
Pheasey ...	—	—	11*	—	—
Rugeley ...	270	6	1	11	11
Sedgley ...	285	20	2	19	21
Shelfield ...	362	14	14	17	51
Shorth Heath ...	81	18	25	45	2
Stafford:—					
North Walls and Rising Brook ...	1,042	50	5	95	88
Tamworth ...	—	—	2*	—	—
Tettenhall ...	271	11	29	26	20
Tipton ...	249	—	38*	6	17
Uttoxeter ...	372	9	4	18	17
Wednesbury ...	—	—	22*	—	—
Wednesfield ...	92	13	4	23	1
Weston Coyney ...	44	6	2	14	4
<b>TOTAL: ...</b>	<b>4,762</b>	<b>240</b>	<b>295</b>	<b>535</b>	<b>381</b>

\*Indicates child is on waiting list because of a staffing vacancy for a Speech Therapist.

<i>Hospital or Authority</i>	<i>No. of children under treatment at 31.12.60</i>
Birmingham Children's Hospital ...	6
Stoke-on-Trent Education Authority ...	1
Wolverhampton Royal Hospital ...	16
Shropshire Education Authority ...	1
North Staffordshire Royal Infirmary ...	25
Walsall Manor Hospital ...	7
	<hr/> 56 <hr/>

**Table 19.   Diagnosis of children attending County Speech  
                  Therapy Clinics during the year**

Cleft Palate	...	...	...	...	...	17
Cluttering	...	...	...	...	...	2
Dysarthria	...	...	...	...	...	16
Dysenia	...	...	...	...	...	13
Dyslalia (multiple)	...	...	...	...	...	343
Dyslalia (simple)	...	...	...	...	...	34
Dysphasia	...	...	...	...	...	5
Dysphonia	...	...	...	...	...	15
Indistinct Speech	...	...	...	...	...	2
Nasality (excessive)		...	...	...	...	2
Retarded speech	...	...	...	...	...	86
Sigmatism	...	...	...	...	...	33
Stammering	...	...	...	...	...	255
Stammering and dyslalia	...	...	...	...	...	41
Laryngectomy	...	...	...	...	...	1

One speech therapist resigned in April and one in June, leaving one speech therapist for the whole of the County until September when four speech therapists were appointed. Two full-time and two on a part-time basis, working 4 and 6 sessions per week. Five speech therapists are now working for the County and their time is equivalent to four full-time therapists.

In consequence of these staff changes the following Clinics were closed during the year:—

Bilbrook    Blackheath    Kingswinford    Tipton

The following clinics were only open for approximately three months of the year.

Lichfield    Rugeley    Sedgley    Shelfield

With the coming of new staff the following Clinics were opened or re-opened:—

Aldridge	Bilston	Brownhills	Kidsgrove
Lichfield	Rugeley	Sedgley	Shelfield
Short Heath	Tettenhall	Wednesfield	Weston Coyney

In addition treatment was given at the following special schools during school term:—

High Arcal	...	...	one session per week
Standon Bowers	...	...	one session per fortnight
Walton Hall	...	...	one session per fortnight
Wightwick Hall	...	...	four sessions per week
Loxley Hall	...	...	one session per week
William Baxter	...	...	one session per fortnight

### Ultra Violet Light Clinics

Treatment has been given at the various clinics as shown in the following table. Compared with 1959 there has been a general fall in the number of children referred for treatment, the number of cases for 1959 and 1960 being 291 and 171 respectively. There was a proportionate decrease in the number of treatments given viz., 2,607 this year as compared with 3,753 in 1959.

The Clinic at Rugeley was closed throughout the year.

As usual there was comparatively little treatment carried out during the summer months despite its wetness and lack of sunshine.



**Table 20. No. of children referred to Ultra Violet Light Clinics and the number of treatments**

CLINIC		Number of cases referred					Total Number of treatments				
		Jan. to Mar.	Apr. to June	July to Sept.	Oct. to Dec.	Total	Jan. to Mar.	Apr. to June	July to Sept.	Oct. to Dec.	Total
BILSTON	... ..	19	3	—	9	31	140	102	—	52	294
CANNOCK	... ..	6	2	4	4	16	298	222	140	224	884
LICHFIELD	... ..	1	—	—	1	2	28	5	—	4	37
PHEASEY	... ..	1	1	—	3	5	36	11	—	15	62
ROWLEY REGIS (Mace St., Old Hill) (Blackheath)	... ..	5	—	4	5	14	57	30	14	37	158
(Tividale)	... ..	—	—	—	16	16	33	10	—	143	186
	... ..	—	—	—	2	2	—	—	—	14	14
STAFFORD	... ..	—	—	—	2	2	12	—	—	7	19
TIPTON (Central)	... ..	—	11	2	8	21	—	142	10	64	216
WEDNESBURY (Mesty Croft)	... ..	—	8	—	14	22	—	182	—	54	236
WILLENHALL	... ..	21	2	—	17	40	277	72	—	152	501
TOTALS	... ..	53	27	10	81	171	881	776	164	786	2,607

The following table shows a summary of the cases which have been treated and the improvement made in their condition.

TABLE 21

CLINIC			"A" No. of children attended		No. of children who gained or lost weight			Change in Nutrition		Change in appetite after treatment			No. of children who did not complete treatment
					Gain	No Change	Loss	Impro'd	No Change	Impro'd	No. Change	Worse	
BILSTON	...	...	...	32	32	—	—	32	—	32	—	—	—
CANNOCK	...	...	...	17	16	—	—	15	1	16	—	—	1
LICHFIELD	...	...	...	4	2	1	—	2	1	2	1	—	1
PHEASEY	...	...	...	8	8	—	—	7	1	7	1	—	—
ROWLEY REGIS—													
Blackheath	...	...	...	33	18	2	—	16	4	15	5	—	13
Mace Street	...	...	...	19	12	—	—	11	1	9	3	—	7
Tivdale	...	...	...	7	6	—	—	6	—	6	—	—	1
STAFFORD	...	...	...	4	2	—	—	1	1	1	1	—	2
TIPTON	...	...	...	28	15	7	2	22	2	22	2	—	4
WEDNESBURY—													
Mesty Croft	...	...	...	50	38	12	—	38	12	38	12	—	—
WILLENHALL	...	...	...	36	30	—	5	30	5	31	4	—	1
TOTAL	...	...	...	238	179	22	7	180	28	179	29	—	30

Table 21 shows a summary of the cases which have been treated and the improvement made in their condition.

Of the 208 children who completed treatment 85% are considered to have improved in nutrition following the treatment. One cannot rule out the psychological element from these results, but nevertheless the parents are generally enthusiastic as to the benefits derived.

The following analysis shows the conditions from which the children were suffering together with the results of treatment. The condition of one child, who had chronic T's and A's, worsened during treatment.

					<i>No.</i>	<i>Treatment</i>
				<i>Benefit</i>	<i>Benefit</i>	<i>Incomplete</i>
Anorexia	...	...	...	8	2	1
Psoriasis	...	...	...	3	—	—
Acne	...	...	...	15	—	—
Gingivitis	...	...	...	1	—	—
Chilblains	...	...	...	2	1	—
Recurrent styes	...	...	...	2	1	4
Bronchitis	...	...	...	19	6	—
Chronic bronchitis & asthma				2	—	—
Chronic respiratory infection				2	—	1
Recurrent coughs and colds...				12	—	2
Asthma	...	...	...	2	2	1
General debility	...	...	...	66	12	6
General debility & blepharitis				2	—	—
General debility & bronchitis				1	—	3
General debility and frequent colds	...	...	...	9	—	1
Post-operative debility	...	...	...	—	—	1
Nervous debility	...	...	...	11	—	1
Anaemia	...	...	...	2	—	—
Cervical adenitis	...	...	...	1	—	—
Chronic T's and A's	...	...	...	7	2	2
Catarrh	...	...	...	9	3	—
Malnutrition	...	...	...	1	1	7
				—	—	—
Totals	...	...	...	177	30	30

## Hospital Treatment

### (i) *Treatment of Tonsils and Adenoids*

	1958	1959	1960
No. of children referred by School Medical Officers and County ENT Consultants	469	587	611
No. of children so referred who received operative treatment ...	211	161	225
Total number of children notified by hospitals who received operative treatment... ..	1,718	1,242	1,931
No. of children awaiting treatment	1,131	807	558

Full information is not received from all hospitals in regard to treatment of these cases. Hospitals endeavour to co-operate by giving priority to urgent cases, but there is often a substantial period of waiting involved before the operative treatment can be obtained.

The survey begun in 1958 regarding outstanding cases has continued and from the original total of 3,119 only 50 cases remain to be investigated. Of this number some cases are under review and difficulties are being encountered in tracing the present whereabouts of several children.

### (ii) *Orthopaedic Treatment*

	1958	1959	1960
No. of children referred to Hospitals	289	189	194

### (iii) *Orthoptic Treatment*

	<i>No. of children referred to Hospitals</i>			
	1957	1958	1959	1960
Burton-upon-Trent Hospital	1	6	1	1
Corbett Hospital ... ..	1	1	1	26
Derby Infirmary ... ..	—	1	1	—
Dudley Guest Hospital ...	3	21	9	3
Lichfield Victoria Hospital	47	68	37	35
North Staffs. Royal Infirmary	76	94	79	89
Staffordshire General Infirmary	59	60	51	66



Tamworth St. Editha's Hospital	—	—	9	5
Walsall General Hospital... ..	2	1	2	6
West Bromwich and District General Hospital ... ..	3	6	7	61
Wolverhampton Eye Infirmary ...	39	53	43	42
	<hr/>	<hr/>	<hr/>	<hr/>
	231	311	240	334
	<hr/>	<hr/>	<hr/>	<hr/>

## REPORT OF THE PRINCIPAL COUNTY SCHOOL DENTAL OFFICER

### Staff

The fact that the staffing position at the end of the year showed little or no deterioration compared to that at the end of 1959 gives cause for no satisfaction. The equivalent of approximately 14 whole-time dental officers to treat some 139,000 children of school age in the County is grossly inadequate to provide comprehensive treatment to any but a small proportion. Several of the dental officers are approaching retiring age and once again it proved impossible during the year to appoint a whole-time dental officer to any of the vacant areas.

\* Dr. D. Davies, the Principal School Dental Officer resigned in May to take up a similar appointment with another Authority, Mr. F. C. Winter consenting to serve as Acting Principal County School Dental Officer in a part-time capacity until Mr. J. C. Timmis was appointed in November.

Two part-time dental officers resigned during the year, but it was possible to appoint two other part-time officers to the Uttoxeter area.

Unless it proves possible to recruit whole-time dental officers in the near future, the dental service in Staffordshire will deteriorate to an alarming extent. Letters were sent to the Deans of all the teaching Dental Hospitals in the U.K., asking for their help in interesting final-year students in school dentistry in general and in the Staffordshire County Council service in particular. Replies generally showed sympathy with our needs, but several pointed out that the hospitals

themselves find difficulty in recruiting staff owing to the high earnings obtainable in National Health Service practice.

A 12½% increase on all salary scales of dental officers employed in local authority services was announced by the Dental Whitley Council in November and it is to be hoped that this award may help to turn the tide of dwindling staff.

The Training School for Dental Ancillaries opened at New Cross, London, in October with an initial entry of 60 girls for a 2 year course. It is intended to train 120 girls each year thereafter. These ancillary workers will be employed in the School Dental Service throughout the Country, carrying out conservative work and the extraction of deciduous teeth under the supervision of school dental officers. Their employment in the School Dental Service should provide a much needed re-inforcement. However, a continuous drive to recruit dental officers is necessary. Moreover, although the number of trained ancillaries will be small for some years to come, it must not be forgotten that each will have to work under the supervision of a dental officer.

### **Clinics and Equipment**

Several new Clinics with excellent dental accommodation were opened during the year, including those at Aldridge, Brownhills, Short Heath, Wednesfield, Bentley, Darlaston, Lower Gornal, Tipton and Tividale. With the exception of Short Heath and Tividale, it is regrettable that no dental staff could be recruited to work in these new Clinics. As a fundamental point in retaining existing staff and attracting new staff is to provide up-to-date equipment in pleasant surroundings, plans were approved to buy modern equipment for all occupied surgeries to bring them up to acceptable standards. These include dental units, high-speed airtor drills and x-ray machines. Although it was felt unjustifiable to equip all the new, unoccupied, dental clinics while recruiting prospects remain poor, approval was obtained to purchase one complete set of equipment to be kept on hand for use whenever an appointment of another dental officer could be made.

Of the six mobile dental clinics in use during the year—one was used whole-time and the other five on a part-time



basis. Their use brings facilities for dental treatment to children at schools in the rural and less densely populated areas of the County and dental officers using them find working conditions good.

Areas remaining without dental services were Tipton, Darlaston, Wednesbury, Coseley, Brownhills and Aldridge. In March temporary arrangements were made with the Wolverhampton Authority for children in Wednesfield schools to receive treatment for pain and sepsis at the Red Hill Street Dental Clinic, Wolverhampton.

### **Inspection and Treatment**

The pattern and amount of dental inspections and treatment were very similar to those of 1959. 25,548 children were inspected at schools, compared with 27,053 in 1959. This represents the routine inspection of only about 1/5th of the total school population and is indicative of the staff shortage. The number of "special" inspections rose from 6,907 in 1959 to 7,538. It is to be expected that where staff shortage prevents adequate routine inspections the number of children seeking treatment as "specials" because of pain or some other urgent reason, will increase. Dental Officers in one or two areas report that so many "specials" were seeking treatment that little time was left to carry out routine treatment.

17,648 children made 32,864 attendances for treatment, i.e. each child made 1.8 attendances on average. The number of fillings showed a slight increase at 21,734 over the figure of 21,426 for 1959, whilst the number of extractions 23,201 a very slight decrease from 23,728 for 1959. 5,656 general anaesthetics were administered, compared with 6,136 for 1959.

Orthodontic treatment was continued, restricted in amount partly by shortage of staff and partly as a matter of policy, it being felt that too much of the dental officers' time

should not be taken up with orthodontics whilst there was so much urgent and more basic treatment to be carried out. Nevertheless, some 271 orthodontic appliances were supplied all constructed in the County Council's Dental Laboratory

248 artificial dentures, also constructed in the County Council's Dental Laboratory were fitted for school children compared with 235 in 1959. This increase reflects the continuing deterioration of the teeth of the children.

X-rays were taken by the Dental Officers where necessary and in this respect the interim report of the Adrian Committee on the dangers of X-ray radiation in Dentistry is of interest. It states, that whilst every effort should be made to protect patients, especially children and adults of reproductive age, from stray radiation, there is no need to limit the judicious use of X-rays nor was there any evidence that, properly used, dental X-rays constituted any significant hazard. Steps were taken to familiarise all dental staff with the precautions and techniques recommended in the report.

Ultra high-speed airotor drills were installed in the Stafford and Lichfield Clinics during the year. Their use greatly speeds up the preparation of cavities and is generally well tolerated by the children. The lack of vibration and lightness of pressure render this form of drill much less unpleasant than the orthodox drill and it is intended to extend the use of this type of drill to most of the County Council Clinics.

Increasing use was made of local anaesthetics when carrying out conservative work, whether with ultra high-speed or orthodox drills, thus rendering this form of treatment painless. This practice is to be encouraged, as any method of making dental treatment less unpleasant is of the greatest value in promoting regular dental care.

### **General Observations**

There is every reason to believe that the incidence of



dental decay is still rising coincidentally with a rising consumption of sugar. Faced with an overall shortage of dental manpower, this shortage being particularly marked in the School and Maternity and Child Welfare Service, some education of the public must be undertaken to prevent an ever worsening situation. The public should be made to realise that the eating of sweets, sweet biscuits, cakes and sticky foods between meals is largely to blame in causing dental decay.

A national campaign to supply information regarding the causation of dental caries and some simple precautionary measures which people might take to help themselves reduce the amount of decay would be very valuable. Such a campaign, using television, radio, films and newspapers, should be centrally organised. Locally organised campaigns could then powerfully reinforce the advice given. Local efforts, in the absence of a national campaign would be largely nullified by the continuing advertising of sweets and sweet things.

Attention was drawn during the year to the undesirable example created by school tuck-shops selling dentally harmful confections and it is to be hoped that such decay producing articles as sweets, sweet biscuits and sticky buns will be replaced by fresh fruit, nuts and potato crisps.

The fluoridation of public water supplies, which over the last 15 years in many countries of the world has been shown conclusively to reduce the amount of dental decay by as much as 60% without any harmful side-effects, awaits a national lead from the Ministry of Health who have been conducting pilot schemes of water fluoridation in Anglesey, Kilmarnock and Watford.

An energetic dental health campaign together with fluoridation of the water supplies might be expected to bring about a very marked reduction in the incidence of dental decay, thereby saving a prodigious amount of public money and man-hours at present spent in reparative treatment. Never was the old adage "prevention is better than cure" so true.

**Dental Inspection and Treatment carried out by the Authority**  
**year ended 31st December, 1960**

1.	Number of pupils inspected by the Authority's Dental Officers:—			
	(a) At periodic inspections...	...	...	25,548
	(b) As Specials	...	...	7,583
	Total (1)	...	...	<u>33,131</u>
2.	Number found to require treatment	...		*25,466
3.	Number offered treatment	...	...	20,498
4.	Number actually treated	...	...	17,648
5.	Number of Attendances made by pupils for treatment including those recorded at heading 11 (h) below	...	...	32,864
6.	Half-days devoted to (a) Periodic (School)			
	Inspection	...		242
	(b) Treatment	...		4,292
	Total (6)	...	...	<u>4,534</u>
7.	Fillings—(a) Permanent teeth	...	...	20,927
	(b) Temporary teeth	...	...	807
	Total (7)	...	...	<u>21,734</u>
8.	Number of teeth filled—			
	(a) Permanent teeth	...		18,500
	(b) Temporary teeth	...		751
	Total (8)	...	...	<u>19,251</u>
9.	Extractions—(a) Permanent teeth	...	...	16,794
	(b) Temporary teeth	...	...	6,407
	Total (9)	...	...	<u>23,201</u>
10.	Administration of general anaesthetics for extractions	...	...	5,656

# 11. Orthodontics—

(a)	Cases commenced during the year	...	153
(b)	Cases brought forward from previous year	... ..	94
(c)	Cases completed during the year	...	105
(d)	Cases discontinued during the year	...	32
(e)	Pupils treated with appliances	...	247
(f)	Removable appliances fitted	... ..	271
(g)	Fixed appliances fitted	... ..	1
(h)	Total attendances	... ..	1,708

12.	Number of pupils fitted with artificial teeth	... ..	248
-----	---	--------	-----

13.	Other operations—(a) Permanent teeth	...	3,992
	(b) Temporary teeth	...	2,655
	Total (13)	... ..	<u>6,647</u>

\* The difference between the number of children found to require treatment (heading 2) and the number referred for treatment (heading 3) represents the extent to which dental officers concentrate on the more pressing forms of treatment. For example, carious temporary teeth are not referred for consideration, except for special reasons, particularly where they are shortly to be shed. Children who have persistently refused offers of treatment in the past and children who have clear evidence of receiving treatment from a general dental practitioner are similarly not referred.

PART IV—INFECTIOUS DISEASE

Table 22. Summary of Notifications from Head Teachers Comprehensive Statistics 1953-60

	1953	1954	1955	1956	1957	1958	1959	1960
Scarlet Fever	519	447	308	280	306	783	614	490
Diphtheria	36	15	16	1	—	—	—	—
Measles	4,650	963	5,520	690	4,900	2,221	4,876	1,410
Rubella	712	820	333	915	473	936	372	367
Mumps	1,721	3,170	1,027	1,155	2,315	2,790	1,198	5,405
Whooping Cough	1,425	773	519	1,175	1,246	342	576	1,082
Chicken Pox	3,544	3,121	2,246	3,770	1,482	3,555	2,731	3,537
Influenza	285	988	283	110	7,551	159	1,467	53
Dysentery	1	171	41	156	108	318	278	59
Diarrhoea	—	—	—	—	—	139	39	4
Diarrhoea and Sickness	—	—	7	13	101	133	101	6
Vomiting (Epidemic)	—	—	—	—	—	158	104	143
Enteritis	—	—	—	—	—	50	14	19
Food Poisoning	37	69	70	69	81	2	2	24
Hepatitis	—	—	—	—	5	7	67	435
Paratyphoid	—	—	—	—	10	—	—	—
Tonsillitis	—	—	4	4	—	13	7	4
Sore Throat	—	—	—	—	—	21	4	34
Glandular Fever	—	—	1	5	—	6	10	2
Impetigo	21	42	53	21	78	45	11	30
Ringworm	5	1	6	2	13	11	8	10
Scabies	4	2	—	—	6	14	14	11
Skin Infection	—	—	—	2	13	8	—	—
Conjunctivitis	1	—	1	1	11	1	2	10
Verruca	—	—	—	—	—	120	30	287
Athletes Foot	—	—	—	—	—	25	4	4
Meningitis	1	5	—	1	1	6	—	—
Poliomyelitis	8	7	14	3	8	4	3	—
Cerebral Spinal Fever	1	—	1	—	—	—	—	—
Shingles	—	—	—	—	—	—	—	1
TOTALS	13,001	10,594	10,450	8,373	18,708	11,867	12,532	13,427



## **Infectious Diseases**

The total number of cases of infectious diseases in 1960 viz. 13,427 was somewhat greater than in the previous year (12,532) but both figures did not differ markedly from the average over the past 10 years. The striking feature of this year's figures was the epidemic of mumps, for the number of cases recorded by Head Teachers (5,405) was more than four times the number recorded for the previous year (1,198). The disease reached peaks both in March and again in October, after the schools re-opened following the summer holidays, but there was a substantial number of cases in every month of the year.

Other diseases of which the number of cases increased were chicken pox, the number of which increased from 2,731 to 3,537.

Hepatitis was very much more prevalent than in previous years. The total number of cases recorded was 435 as against 67 in 1959. This is normally a condition of the summer and autumn months and the peak figure was reached in November 1960. Outbreaks occurred in many parts of the County but particularly in certain Schools in Brownhills, Tipton, Tividale, Wednesbury and Wednesfield. It was noted in one instance that the children affected appeared all to live in a very circumscribed area on a new housing estate and it is suggested, therefore, that transmission may have occurred as a result of the children playing with one another out of school rather than at the school, which was a new one where conditions were very good. The children in the School were in five different forms and there was no undue incidence of illness in any particular age group. This same feature of affected children living in close geographical proximity was noticed in at least three other outbreaks.

## **Verrucae**

The incidence of verrucae reported this year i.e. 253 is considerably greater than on any previous occasion. It is felt that this is very largely due to increased attention being paid to foot hygiene by medical officers and school nurses who are now very keenly aware of the infectious nature of the

condition, which when on the sole of the foot can be painful and to some extent disabling. When outbreaks have occurred in schools, comprehensive surveys have been carried out on the children's feet and those affected are prohibited from attending swimming baths or undertaking bare-foot dancing and other bare-foot activities. The use of antiseptic foot baths at school swimming baths has been enforced as a routine to prevent the spread of infection.

### **Epidemic Vomiting**

There was a small increase in the number of cases of epidemic vomiting. Reports of outbreaks were received from schools as widely separated in the County as Leek, Stafford and Rangemore. In each case the disease was of dramatic onset with abdominal pain and vomiting but no diarrhoea. The condition soon cleared and has been more of a nuisance than of serious import. The outbreak at Rangemore C.P. School was interesting in that the first child to be taken ill was a village child who did not partake in school dinners. She complained of a headache and suddenly vomited during the school assembly. Following this, 26 cases, including the Headmaster, occurred over the next five days, the symptoms being similar. The illness was of short duration. The condition was not related to the participation in school meals and spread occurred among the families of the children affected.

### **Sore Throats**

34 cases of sore throats were reported this year. These largely related to certain schools in the Cheadle Rural District. The symptoms included sore throat, headache and cervical gland enlargement. The outbreak lasted over several weeks, the children's average period of absence being three weeks. Advice was given to the Head Teachers regarding spacing the children in the class, use of individual towels to prevent cross infection, ventilation of school rooms etc. Daily visits were paid by the local School Medical Officer to the School to deal with returning cases and any minor upsets. This condition should be considered together with scarlet fever since the organism was the same i.e. the hemolytic streptococcus.



The number of cases of scarlet fever has dropped substantially this year for the third year in succession. An outbreak occurred in February at a School in Marchington. Swabbing of noses and throats detected several carriers who were referred to their family doctors for treatment which rendered the children free from infection.

Foremost among the more favourable features of the year was the striking decline in the number of Influenza cases which fell from 1,467 in 1959 to 53 in the year under review.

Measles declined from 4,876 cases in 1959 to 1,410 cases in 1960, the lowest figure for several years, which once again strikingly illustrates the biennial periodicity of the disease. It is clear from the figures that the number of cases in 1961 will be very substantially above those of 1960.

### **Dysentery**

The number of cases of dysentery and diarrhoea both fell substantially as compared with the previous year. This is again a very welcome improvement and one which we hope will be maintained, illustrating as it does a better standard of hygiene.

Once again it is very pleasant to note the absence from the County of Diphtheria. Unhappily, however, outbreaks are now recurring in many parts of the Country—so that while most parents realise the importance of keeping their child's immunisation state up-to-date there is a substantial minority of parents who fail to ensure their child's protection against this most serious disease. Diphtheria immunisation is offered as a routine to all children on school entry and again at about 10 years—but the parents who are careless of their children's safety assist this disease to smoulder on in the community.

TABLE 23. Number of suspected cases of Infectious Diseases notified by Head Teachers, 1960

Disease	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Totals
Scarlet Fever	82	94	74	33	19	13	44	—	18	36	44	33	490
Measles	108	94	58	93	38	129	144	—	219	91	157	279	1,410
Rubella	73	73	53	49	28	16	14	—	23	12	7	19	367
Mumps	220	441	896	351	389	335	399	—	168	915	781	510	5,405
Whooping Cough	129	77	107	78	127	118	183	—	149	62	24	28	1,082
Chicken Pox	273	593	689	325	353	273	373	—	50	147	206	255	3,537
Influenza	4	—	—	—	—	—	—	—	—	6	5	38	53
Dysentery	2	9	7	—	4	6	1	—	30	—	—	—	59
Diarrhoea	—	—	2	—	—	—	2	—	—	—	—	—	4
Diarrhoea and Sickness	—	—	—	—	—	6	—	—	—	—	—	—	6
Vomiting	—	—	68	—	—	41	13	—	—	—	21	—	143
Enteritis	4	—	1	—	2	7	4	—	—	1	—	—	19
Food Poisoning	—	21	—	—	—	—	3	—	—	—	—	—	24
Hepatitis	42	31	33	12	27	51	52	—	50	25	112	—	435
Tonsillitis	3	—	1	—	23	4	—	—	—	—	—	—	4
Sore Throat	—	—	—	—	—	—	3	—	1	—	1	2	34
Glandular Fever	—	1	—	—	—	—	—	—	1	—	—	—	2
Impetigo	10	4	5	—	—	1	3	—	—	—	5	2	30
Ringworm	5	2	1	—	—	1	—	—	—	—	—	1	10
Scabies	—	—	—	—	—	—	—	—	9	—	1	—	11
Conjunctivitis	—	4	2	—	1	—	3	—	—	—	—	—	10
Verrucae	29	2	15	—	—	14	9	—	60	104	54	—	287
Athletes Foot	—	—	—	—	—	3	1	—	—	—	—	—	4
Shingles	—	—	—	—	—	—	—	—	—	—	—	1	1
TOTALS	984	1,446	2,012	941	1,011	1,018	1,251	—	778	1,400	1,418	1,168	13,427



Table 24. No. of children found to have been vaccinated when examined at the periodical medical inspection

Age Group	No. examined	No. vaccinated	No. unvac- cinated	Percentage unvaccinated					
				1955	1956	1957	1958	1959	1960
Entrants	13,024	2,785	10,239	79.97	80.66	81.22	77.42	77.65	78.62
2nd Age Group	9,165	1,969	7,196	64.34	69.48	68.29	71.10	78.30	78.52
3rd Age Group	12,953	4,247	8,706	67.14	65.52	69.36	66.81	72.63	67.21
Other Periodic Inspections	4,730	1,073	3,657	69.55	67.19	71.07	69.32	75.19	77.32

The proportion of children in the entrant and second age group who were found to be vaccinated at the Routine Medical Inspections was little changed compared to the previous year but a welcome increase was seen in the number vaccinated in the third age group. Sustained efforts are made to persuade parents to take their children for vaccination by general practitioners and the advice now being given is that vaccination can well be given at any time in the first five years of life before school entry.

## Diphtheria Immunisation

**Table 25.** No. of children (5-14 years) immunised during the year:—

	1957	1958	1959	1960
Complete immunisation ...	2,592	1,549	3,349	6,015
Re-inforcement doses ...	12,753	6,546	14,740	25,583
	<hr/> 15,345	<hr/> 8,095	<hr/> 18,098	<hr/> 31,598

It will be observed that there is a considerable rise in the figures of children immunised during the year as compared with 1959 and is the highest total since 1951 when the comparable figure was 32,755. This was made possible since there was some lessening during the year of the demands of the Polio vaccination campaign.

Again no case of diphtheria was reported in the County during the year.

Parents were offered immunisation of their children against diphtheria on entering school if previously unprotected, and reinforcement doses at eight to ten years.

## (d) Tuberculosis

**Table 26.** Summary of Reports received from Chest Physicians

Number of children (aged 5-15 years) on Dispensary registers at the end of 1959				
...	...	...	...	310
Number of new cases during the year				
...	...	...	...	38
Becoming 5 years old	...	...	...	1
Number of deaths	...	...	...	—
Number discharged having left the district	...	...	...	2
Number discharged having recovered	...	...	...	16
Number becoming 15 years old	...	...	...	27
Number of children on registers at end of the year 1960				304

Summary of cases undergoing treatment at the end of the year 1960:—

Pulmonary (including pleura and intrathoracic glands)	224
---	-----

Non-Pulmonary—

Bones and joints	...	...	...	...	...	9
Glands	...	...	...	...	...	23
Abdomen	...	...	...	...	...	3
Skin	...	...	...	...	...	1
Miscellaneous	...	...	...	...	...	7

Analysis of Treatment:—

Pulmonary—

In Sanatoria	...	...	...	...	...	9
At home	...	...	...	...	...	123

Non-Pulmonary—

In Orthopaedic Hospitals	...	...	...	...	—
In other hospitals	...	...	...	...	—
At home	...	...	...	...	39

Cases under observation:—

Number of suspected cases at the end of the year 1960	...	...	...	...	...	58
Number of cases found to be non-tuberculous during the year	...	...	...	...	...	1,181

Two special investigations have been started during the year owing to a teacher at an ordinary school and a member of the Staff of a residential special school being found to be suffering from pulmonary tuberculosis.

The Staff and pupils at three schools were involved as the teacher had been working in two local day schools. Subsequently 369 children were Heaf tested and eleven were X-rayed. Five results were negative and six results are awaited.

The other members of the Staff at these schools were offered opportunities of attending Mass Radiography Units.



## **Tuberculin Testing**

The scheme for tuberculin testing of “entrants” in infant schools at Bilston, Coseley, Tipton, Rowley Regis, Brierley Hill, Wednesbury and Tettenhall areas has continued throughout the year.

The following figures show the number of children tested and the subsequent results :—

	1959	1960
No. of children tested ... ..	1,996	1,989
No. of positive reactors ... ..	26	29
No. of cases referred for x-ray ...	27	10

In view of the recommendation of the Adrian Committee, children up to the age of 15 who showed a positive reaction were referred to the appropriate Chest Clinic. Only contacts over 15 years of age continued to be referred to Mass Radiography Units.

The private doctors concerned were informed of the names and addresses of the children so referred. No child or family contact was found to be suffering from pulmonary tuberculosis.

## **HEALTH EDUCATION**

It is considered important that the children in the schools should receive training in matters of health and teachers and the staff in the School Health Service are encouraged to give talks on a variety of subjects. Propaganda pamphlets and leaflets have been supplied to the head teachers and the medical and nursing staff keep a supply of leaflets to hand to parents and children when considered necessary during the course of medical inspection at the schools. A library of film strips has been formed so that doctors may be able to give illustrated talks. A number of talks were given during the year to interested groups such as Parent-Teacher organisations.

A letter is sent to the parents of each school entrant giving a brief outline of the facilities provided by the School Health Service and a leaflet in humorous style pointing out some of the elementary rules of health is distributed to each school leaver.



PART V—GENERAL HEALTH

Table 27. Classification of the Physical Condition of Pupils inspected during the year at periodical medical inspections

Age Groups Inspected (By years of birth)	No. of Pupils Inspected	Physical Condition of Pupils Inspected			
		Satisfactory		Unsatisfactory	
		No. (3)	% of Col. 2 (4)	No. (5)	% of Col. 2 (6)
1956 and later ... ..	591	556	94·1	35	5·9
1955 ... ..	6,911	6,877	99·5	34	0·49
1954 ... ..	5,522	5,512	99·8	10	0·18
1953 ... ..	1,257	1,252	99·6	5	0·39
1952 ... ..	424	423	99·9	1	0·24
1951 ... ..	243	243	100	—	—
1950 ... ..	3,569	3,564	99·86	5	0·14
1949 ... ..	5,596	5,595	99·98	1	0·02
1948 ... ..	2,413	2,412	99·98	1	0·04
1947 ... ..	393	393	100	—	—
1946 ... ..	4,035	4,028	99·82	7	0·17
1945 and earlier ... ..	8,918	8,903	99·8	15	0·17
	39,872	39,758	99·7	114	0·29

This year the number of children classified at Routine Medical Inspections as being in an unsatisfactory state of health, increased to 114 or 0·29 %. The lowest figure of this nature ever recorded was 23 in 1959 or 0·07 %, whilst the corresponding figure for 1958 was 202 pupils or ·66 %. A classification of this nature is naturally subject to the opinions of the individual medical officers but the trend throughout the County towards improved nutrition continues. The school medical officers, however, continue to report an increasing number of obese children due to eating too many sweets and biscuits. While in most cases adults who are overweight tend to regard their condition with some concern—most parents with obese children tend to regard the condition in their offspring with satisfaction rather than regret. Many consider obesity a sign of robust health and mothers with slim children request advice as to how to “build them up” which is quite unnecessary.

Medical officers continue to report that although entrants to school still tend to be flabby and catarrhal they improve after a period of school attendance; partly, no doubt, due to the influences of regular hours, proper exercise and balanced school meals and milk.

**Table 28. Milk in Schools Scheme**

<i>Type of Milk</i>	<i>No. of Suppliers</i>	<i>No. of Schools supplied</i>	<i>No. of Pupils</i>
<i>Maintained Schools:</i>			
Pasteurised ...	37	642	113,153
Tuberculin Tested	9	18	363
	<hr/> 46 <hr/>	<hr/> 660 <hr/>	<hr/> 113,516 <hr/>
<i>Non-Maintained Schools:</i>			
Pasteurised ...	12	34	4,014
Tuberculin Tested	2	2	97
	<hr/> 14 <hr/>	<hr/> 36 <hr/>	<hr/> 4,111 <hr/>

There has been a decrease of 3,507 children taking milk in maintained schools but 4 more schools are being supplied as compared with 1959.

The number of non-maintained schools is 5 less than in the previous year and the number of children taking milk decreased by 276.

**Table 29. Milk for Handicapped Pupils unable to attend school**

No. of old applications renewed	...	...	35
No. of new applications granted	...	...	20
No. of children who ceased to receive milk during the year	...	...	13

## SCHOOL MEALS

The Director of Education has kindly supplied the information regarding Schools Meals and Physical Education.

1960 has been another year of expansion and development in the School Meals Service. The daily number of meals has shown a very considerable increase and 21 new kitchens were opened during the year.

### **New kitchens opened at new schools**

#### *County Area*

Stafford, Doxey County Primary School

Kidsgrove Grammar School

Tamworth, Mercian County Secondary Boys' School  
(Ashby Road)

Wombourne, Blakeley Heath County Primary Junior  
School

#### *Cannock Chase Division*

Aldridge, Streetly County Primary School (Egerton  
Road)

Aldridge, Streetly County Secondary School (Queslett  
Road)

Brownhills, Walsall Wood Holly Lane County  
Primary School

#### *South East Division*

Wednesbury, Moorlands County Primary School

Wednesfield, March End Grammar Technical School

### **New kitchens opened at existing schools or replacement schools**

#### *County Area*

Cheadle, St. Giles R.C. School (former kitchen shell  
now equipped as a kitchen)



Checkley, Hutchinson Memorial C.E. Primary School (former kitchen shell now equipped as a kitchen)

Cheadle, Freehay, St. Chad's C.E. Primary School.

Finchfield, West Acre County Primary School

Harlaston, St. Matthew's C.E. Primary School

Hollinsclough C.E. Primary School

Norbury, St. Peter's C.E. Primary School

Stafford, Trinity Fields County Secondary School

Tean, Great Wood County Primary School (former kitchen shell now equipped as a kitchen)

#### *South East Division*

Wednesbury, Albert Pritchard County Primary School (replacement kitchen)

Wednesbury Boys' High School

### **Kitchens re-opened after closure**

#### *County Area*

Mavesyn Ridware, The Henry Chadwick School (previously closed temporarily for modernisation)

Tamworth, Marmion County Primary Junior School (formerly Girls' High School kitchen)

### **Schools provided with meals where no previous provision had been made**

Arrangements have been made to provide meals to the following rural schools in the County Area:—

Alrewas, Fradley St. Stephen's C.E. Primary School (scullery provided)

Fawfieldhead, Newtown Moorland C.E. Primary School

Hints, The Chadwick C.E. Primary School

Hoar Cross, The Meynell C.E. Primary School

Ilam C.E. Primary School



Maer Parochial School (scullery provided)

Rushton Spencer C.E. Primary School

Stowe, The Earl Ferrars County Primary School

Weston-on-Trent, St. Andrew's C.E. Primary School

In most cases it was not possible to provide suitable washing up facilities and for these schools the washing up is returned to the parent kitchen where adequate hygienic facilities exist.

### **Schools provided with new scullery facilities to replace existing unsatisfactory conditions**

The Committee continued its policy of replacing unsuitable and unhygienic conditions for washing up and the following schools were provided with new scullery facilities:—

#### *County Area*

Oakamoor, The Valley County Primary School  
(kitchen shell)

#### *South East Division*

Bilston, Etheridge County Secondary Boys' and  
Girls' Schools (former Central Kitchen converted into dining room and scullery)

Wednesfield, Wood End C.E. Primary School

#### *South West Division*

Brierley Hill, Quarry Bank County Secondary Girls' School

Rowley Regis, Corngreaves Junior Boys' School

Rowley Regis, Siviter's Lane Secondary Girls' School (replaces kitchen which was closed)

Sedgley, Tudor County Primary School

Tipton, Bloomfield County Primary School

Tipton, Sacred Heart R.C. Primary School

### **Dining room re-opened**

The dining room at Waterhouses, Calton C.E. Primary School was re-opened after being closed in July, 1959, because of the low number of meals.

### **Closure of kitchens**

The following kitchens were closed:—

Rowley Regis, Siviter's Lane Secondary Girls' School  
(unsatisfactory kitchen—restored to use as a class-room.

Cellarhead Central Kitchen.

The Cellarhead Central Kitchen was closed in pursuance of the Education Committee's general policy to discontinue the use of Central Kitchens when possible.

### **School Meals Staff training and refresher courses**

A Training Supervisor was appointed in October, 1960, and the Committee's permanent Training Kitchen has been established at Stafford, Flash Ley County Primary School, since October 1960. Training courses have also been held at the Tividale Comprehensive School (South West Division) and a course was held during the summer months especially for Supervisors and Cooks-in-Charge in isolated districts in the north of the County, at Waterhouses County Secondary School. At present, the facilities at the training course at Stafford are being used principally for training newly appointed Cooks-in-Charge and Cook Supervisors.

The third Annual Meeting for Supervisors and Cooks-in-Charge was held at Flash Ley School in Stafford in October, 1960. The Chairman and members of the School Meals Sub-Committee were present. There was an exhibition on 'Milk in the School Meal' which included information on the nutritional value of milk, suitable milk dishes for the school meal and the hygiene of milk.

A non-residential refresher course for Supervisors was held during the Easter holidays at Stafford, Flash Ley County Primary School and a residential course for Cooks and Assistant Cooks was arranged at The County of Stafford Training College, Nelson Hall, at the end of July.

A number of lectures on food hygiene have been given in various areas of the County by the Deputy County Medical Officer of Health and a programme of meetings throughout the County on the subject of stock records was arranged.

### Number of meals provided

The increase in the number of meals and also in the number of School Meals establishments is illustrated by the following particulars which the Director submitted to the Ministry of Education, showing the number of meals served on a particular day in September/October 1960 together with similar information regarding the number of kitchens, etc.

### County Administrative Area (Excluding Newcastle E.D.)

1960

Total Number of Children Present	...	127,984
Total Number of Meals Served to		
Children	... ..	56,411
Adults and Children (daily average July)		57,950
*Total Number of Schools	... ..	640
Schools not taking School Meals		
(included in line above)		31
Number of Kitchens	... ..	241

The Education Committee continued its policy to provide a kitchen at each school wherever possible and as soon as may be, in the belief that such provision is the best for the children and for the schools. The Committee hopes by pursuing a systematic policy of staff training and refresher courses to meet the demands of a rapidly growing Service.

\*Hospital Special Schools, Technical and Further Educational Establishments are not included in this figure.



## PHYSICAL EDUCATION

Schools with halls or gymnasia have been able to continue their normal work in Physical Education without difficulty during a year when there were many days of rain. The small rural schools with no indoor facilities found great difficulty in maintaining their routine work. However inclement weather is not unusual and teachers generally made the fullest use of the sunny periods to take longer games and physical education periods out of doors on playground or playing field.

During the year halls in 10 primary schools and gymnasia in 5 large secondary schools have been equipped with fixed and portable gymnastic apparatus. New swimming baths have been brought into use at Wednesfield and Aldridge Grammar Schools and Wombourne Secondary School.

There is still a serious shortage of specialist teachers in this branch of education, particularly in girls' secondary schools. Where staffing and facilities are good a high standard of work has been maintained. During the Winter and Spring in girls secondary schools much time has been devoted to the coaching of netball and hockey.

There was no decrease of enthusiasm in boys' schools for the major games and all secondary schools devoted much time to learning techniques and playing inter-house and inter-school games. The popularity of the game of basket ball has further increased and the standard of play improved. Many boys schools now have cross country teams which take part in inter-school events. The distance varies from two to three miles according to age. In the Summer Term athletics were the predominant activity, particularly in secondary modern schools. Over the last decade the range of activities in school athletics has gradually broadened to provide interesting activities suitable for all types of physiques. The sprint and middle distance races are still held but to these have been added field events such as shot putting, discus and javelin throwing, high and long jumping and pole vaulting. Cricket and tennis are becoming more commonly played as wickets and courts are provided. Tennis is gradually replacing rounders as a summer game in girls schools.



Cricket coaching centres were again established at 5 centres in different parts of the County for boys of outstanding ability and 10 boys from these were selected to attend a weekend residential cricket school at Lilleshall Hall in December. During the Spring Term indoor coaching was again provided for schools in the South West Division at Stourbridge.

Swimming instruction for boys and girls was arranged at 28 public baths in the Summer months and all available periods were used. During the Spring and Autumn terms 14 baths were used. Apart from County awards 505 scholars gained certificates of the Royal Life Saving Society.

There are now 7 school baths in use and good progress is being made in these schools towards the goal of teaching every boy and girl to swim in good style.

The interest in camping and allied activities was most encouraging and the seven camps were booked to capacity. According to age and experience groups took part for periods of seven days in camps concerned with campcraft, light weight camping, canoeing, climbing and sailing. A new camp was established in the Peak District for boys and was successful although the wet weather in July made conditions difficult.

The Adventure Course for Girls was established for the first time based on Cotwalton Camp and ran throughout the Autumn Term. The activities demanding initiative, endurance and courage included rock climbing, hill walking, camping in the hills, and map reading as well as pursuits demanding skill and perseverance in domestic matters.

The Boys Adventure Course in its third year was well attended. Their excursions ranged far and wide and included a canoe cruise on the River Severn lasting two days and long journeys on foot over hilly terrain in North Wales and the Peak District. They all had some experience in white water

canoeing and rock climbing. The majority of boys and girls came through their adventure courses creditably and returned to their schools enriched through their experiences in mind, body and spirit.

115 school groups came to camps and there was a total attendance of 3,243 boys and girls.

All children who were unable to provide their own plimsolls and clothing for physical education were supplied with them and approximately 40,500 pairs of plimsolls were distributed to all types of schools.

During the Easter holiday a residential course for men and women teachers was held at Dudley Teachers' Training College. The main theme of the course was methods of coaching games such as tennis, net ball and basket ball. Instruction was also given in trampolining. 49 men and women teachers were present.

A course in sailing and canoeing was held during Whitsuntide centred on the camps at Chasewater and Teddesley. 16 men and women teachers attended.

There were three local courses for teachers in infant schools in the Cannock Chase Area and two lecture demonstrations in the teaching of swimming in the South West Division. 258 Teachers took part in these.

The habit of recreating through games and outdoor activities such as are practised in our schools is a good one and should be encouraged by all who are concerned with the health and welfare of the nation. The mind and body are inseparable and interdependent and teachers are often concerned in these times of staff shortage to maintain a balanced programme of work which will ensure a comprehensive education of the young.

### **Remedial Teaching**

During the year 57 children have been treated by qualified teachers of Physical Education in schools for postural or other physical defects.

## Children Neglected or Ill-treated in their own Homes

The Local Committees which were set up in accordance with the provisions of the Joint Circular of the 31st July, 1950, of the Home Office, Ministry of Health and Ministry of Education are continuing to carry out valuable work in regard to these children and during the year seven cases were referred to the Local Co-ordinating Officers. The Area Co-ordination Committees considered 324 cases during the year.

## PART VI—UNCLEANLINESS

Table 30. Infestation with Vermin

(i)	Total number of individual examinations in the Schools by the School Nurses or other authorised persons ...	342,113
(ii)	Total number of individual children examined ... ..	109,893
(iii)	Total number of individual pupils found to be infested ... ..	4,760
(iv)	Number of individual pupils in respect of whom cleansing notices were issued. (Sect. 54(2) Education Act, 1944) ...	58
(v)	Number of individual pupils in respect of whom cleansing orders were issued (Sect. 54(3) Education Act, 1944) ...	15

Table 31. Analysis of Infestation

		<i>Head</i>			
		<i>Body</i>	<i>Clothing</i>	<i>Lice</i>	<i>Nits</i>
No. of children ...	...	3	22	662	6,733

The number of Sacker Combs sold to parents during the year was 200 compared with 267 in 1959.



The percentage of children found infected at hygiene examinations is somewhat diminished as compared with last year. Infestation is mainly limited to a ‘core of problem families’ and these persistent offenders do not realise that there is something of which to be ashamed. Laziness, apathy and ignorance are the primary causes excluding general indifference to personal hygiene. An attempt is being made to improve the position by a more liberal issue of medicated shampoos. The real problem in these cases is that adults as well as children are infected and the help of the local Medical Officers of Health is sought for the supervising of the families. Most of the parents concerned were grateful for this service and regular follow up inspections are made of the children known to have been previously infested.

### Enuresis Alarms

Towards the end of 1957 it was decided to provide a number of nocturnal enuresis alarms under the nursing comfort provisions of Section 28 of the National Health Service Act, 1946 and since then there has been a regular demand for them. A report is also included in the annual report of the County Medical Officer of Health, but a brief summary of results is appended in respect of the children of school age who received the treatment during 1960:—

No. of alarms in use as at 31st Dec. ...	67	
No. of alarms being repaired ...	6	
		<i>Boys   Girls</i>
Waiting list ... ..	124	49
No. of children cured ... ..	39	18
No. of children relapsed after treatment and then cured ... ..	4	2
No. of children relapsed after treatment but much improved ... ..	3	1



No. of children relapsed after treatment and awaiting further trial	...	...	3	1
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#### *Failures*

Too nervous	...	...	...	...	2	—
Heavy sleeper	...	...	...	...	3	1
Unco-operative mother	...	...	...	...	2	1

The proportion of cases assisted by this device gives grounds for satisfaction, for treatment in the past has often proved prolonged and difficult.

Three special schools, Basford Hall, Needwood and Standon Bowers, each have an alarm and excellent results have been reported.

From the start it has been routine procedure to follow up cases six months after the trial period with an alarm ended. During 1960, however, it was decided to review the condition of 34 children who had had treatment twelve months previously. One of the reasons for this was to see whether the children had any emotional upsets resulting from the use of the apparatus. Twenty-nine children had maintained the improvement in their condition and showed no nervous symptoms or behaviour problems. Four children appeared to have lapses to their former condition and the children are to be re-considered for the re-issue of an alarm. One child had relapsed and could only be described as a failure, but in no case was any emotional ill effect discovered.

## **PART VII—HYGIENE**

**Table 32. Inspection of School Premises**

No. of schools inspected	...	...	...	625
No. of school premises reported as having various defects	...	...	...	270
No. of school premises where defects have been rectified	...	...	...	35

The School Medical Officers continue to carry out an annual inspection of school premises and defects were notified to the Director of Education.

More schools were visited this year than last and a slight decrease in the number of defects in school premises was reported. The number of defects notified fell by 7 as compared with last year.

The Education Committee has approved a comprehensive scheme for bringing the hygiene conditions of the schools to a modern standard and improvements are steadily being effected.

Many schools are still over crowded, even many of the new schools, where the medical room has to be used for teaching purposes and medical inspections have to be carried out in unsatisfactory circumstances.

Head Teachers are very co-operative in providing accommodation whenever possible in the schools, but at times it is necessary to arrange for medical inspections to be carried out on premises away from the school.

The liberal use of paint and imaginative schemes of decoration have greatly brightened many of the older schools making them appear lighter, cleaner and more attractive.

Improved hygienic arrangements for handwashing and drying have been arranged in many schools—and the use of paper towels is becoming more widespread.

## **SCHOOL WATER SUPPLIES**

The County Health Inspectors continued to take samples of School and Canteen water supplies during the year. Of the 236 samples taken from 70 schools, 88 were found to be unsatisfactory and appropriate action taken where necessary.

Three schools were connected to main supplies and at a further school, shortly due for replacement, a temporary standpipe was provided. At two other schools which were only partially connected to main supplies the main supplies have now been extended throughout.

Main supplies were available to two schools which had not been connected at the end of the year.

The use of chlorine based sterilising tablets has continued successfully, twenty-three schools still using the tablets at the end of the year.

**Table 33**

(a)	No. of schools at which samples were taken	...	...	70
(b)	No. of samples collected:—			
	(i) for bacteriological examination	...	...	231
	(ii) for chemical examination	...	...	5
(c)	Result of examination:			
	(i) Bacteriological. Satisfactory	...	145	
			Unsatisfactory	86
			—	231
	(ii) Chemical. Satisfactory	...	3	
			Unsatisfactory	2
			—	5
(d)	Main piped supplies laid on during 1960	...	...	4
(e)	Schools without main piped water supply at 31st December, 1960	...	...	32#
(f)	Schools with main piped water available but not yet laid into schools	...	...	2Ø

#This figure includes all schools which are not supplied either by statutory water undertakings or by the water departments of Local Authorities, i.e., it includes not only individual supplies from boreholes, wells, springs, etc., or by churn, but also includes small estate piped supplies and the like.

Ø One of these schools was connected to mains early in 1961.

## SCHOOL SWIMMING BATHS

Three new school swimming baths were opened during the year, bringing the total number of swimming baths at County Schools to seven. Five of the baths are covered and heated and provided with mechanical filtration and chlorination plant. The other two are open-air baths, operating on the fill and empty principle, hand chlorination being applied as required.

The County Health Inspectors made 37 visits of inspection during the year and collected 58 samples of swimming bath water of which 45 were satisfactory and 13 were unsatisfactory. Appropriate action was taken where necessary.

Field tests were carried out at each visit to check the level of residual chlorine in the baths, and also the pH value.



**Table 34**      **Position regarding handicapped pupils at 31st December 1960**

Category	Total known ascertained Pupils		Numbers in Special Schools		Number placed in Special Schools in 1960		Number awaiting admission to Special Schools		Number in or having special provision at an Ordinary School		Number having Home Tuition including those for admission to Special Schools		At Home without Tuition	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
Blind ... ..	15	14	14	8	1	1	1	4	—	—	—	—	—	—
Partially Sighted ...	21	16	13	10	—	2	3	1	5	5	1	—	—	—
Deaf ... ..	43	34	42	34	4	3	1	—	—	—	—	—	—	—
Partially Deaf ...	114	80	42	24	10	2	3	3	65	53	1	—	4	—
Delicate ... ..	108	62	51	28	32	16	3	1	44	26	10	8	—	—
Educationally Sub-Normal ...	808	402	317	160	56	42	193	91	280	141	16	10	4	4
Epileptics ... ..	118	117	8	3	3	2	—	1	107	104	—	—	3	9
Maladjusted ... ..	94	40	35	10	4	1	1	—	55	29	1	1	2	—
Physically Handicapped ...	468	351	76	43	26	15	4	1	340	277	38	23	13	6
Speech Defects ...	577	217	2	—	1	—	—	—	574	217	—	—	—	—
TOTALS ... ..	2,366	1,333	600	320	137	84	209	102	1,470	852	67	42	26	19
GRAND TOTALS...	3,699	920	221	311	2,322	109	45*							

N.B.—Pupils attending Hospital Special Schools are only included in this table in the first column.

Only pupils from the Excepted District of Newcastle-under-Lyme who are in or awaiting admission to residential special schools are included.

\*Most of these children were without tuition as they were of pre-school age whilst thirteen children were awaiting the completion of arrangements for home tuition.



Table 34 includes children who do not come within the categories of handicapped children as defined in the Handicapped Pupils and Special School Regulations, 1959. These suffer from a milder type of handicap which does not prevent their attendance at the ordinary school. They are, however, kept under constant supervision to ensure they are properly placed and that the necessary return can be taken immediately some special educational provision is necessary.

The total number of known handicapped pupils increased by 37 as compared with 1959.

There were 21 more children in special schools at the end of the year and the number waiting admission was 25 less than in 1958. The number at home without tuition increased by 8.

Children suffering from debility and other defects which did not warrant their admission to open-air schools were sent to convalescent homes for short periods. 364 children were admitted during the year, this being a decrease of 63 compared to 1959.

The following shows the distribution of children among the various homes which have been used:—

	<i>Boys</i>	<i>Girls</i>	<i>Total</i>
St. Mary's Home Broadstairs ... ..	52	169	221
Charnwood Forest Home, Loughborough ... ..	—	1	1
Broomhayes Home, Northam... ..	—	1	1
Church Army Homes ... ..	2	2	4
Metropolitan Convalescent Home, Broadstairs ... ..	83	15	98
Heathercombe Brake, Newton Abbott	22	2	24
Victoria Home, Margate ... ..	1	—	1
West Kirby Childrens' Convalescent Home ... ..	7	7	14
	<hr/>	<hr/>	<hr/>
	167	197	364

Various hospitals in the County continue to refer children for convalescence. Parents value this service, for a period of convalescence has often substantially assisted their children to recover after illness or operation. Liaison is maintained with each child's family doctor before the child is sent for convalescence.

The medical records for handicapped children is sent to the child's General Practitioner on leaving school whenever it is felt that the handicap is substantial and is likely to continue into adult life.

### **Home tuition**

Tuition is provided at home in accordance with Section 56 of the Education Act, 1944, for those children who are so severely handicapped that they cannot attend at either an ordinary or special school and also for those who cannot attend an ordinary school, whilst a vacancy is being sought for them in a special school. This form of education is decided upon after examination by a school Medical Officer.

106 children were receiving tuition at the end of the year as compared with 85 in 1959.

In cases where children are convalescing after hospital treatment, tuition is provided sometimes on a short term basis until the children are fit to resume attendance at school.

HOSPITAL SPECIAL SCHOOLS

At the end of the year there were 45 children in Hospital Special Schools. The numbers are not included in table 34, see page 86, which shows the position regarding handicapped pupils. Details are given below.

The Limes, Himley, Stourbridge	...	...	6
Standon Hall Orthopaedic Hospital. Nr.			
Stafford	...	...	8
Queen Mary's Hospital School, Carshalton,			
Surrey	...	...	4
Robert Jones and Agnes Hunt Orthopaedic			
Hospital, Oswestry	...	...	4
Birmingham Hospital Special Schools	...		6
Marlborough Children's Convalescent			
Hospital Special School, Wiltshire	...		1
Worcestershire Hospital Special Schools	...		2
Biddulph Grange Orthopaedic Hospital			
Special School	...	...	14
			—
			45
			—

Table 35. Classification of children referred to the Mental Health Authority

<i>Classification</i>	<i>No. of Children</i>
Prior to 1.11.60 (Section 57(3) Education Act, 1944) and (Section 57(4) Education Act, 1944) from 1.11.60...	65
Requiring supervision after leaving school prior to 1.11.60 (Section 57(5) Education Act, 1944)	46
	—
	111
	—

During the year one child was dealt with under Section 57A(2) and the notification of its unsuitability for education at school was cancelled.



## Further Education of Handicapped Pupils

During 1960 the pattern has been much the same as before and the Authority has provided home tuition in basic subjects for 25 handicapped persons who were over the statutory school leaving age.

The tuition has been mainly concerned with reading, writing and arithmetic with particular emphasis on topics of social, political and economic interest where the student has shown ability to profit from such tuition. In addition, arrangements have been made in one or two cases for persons to receive tuition during their stay in hospitals.

The Authority has also been responsible for the further education and vocational training of blind, deaf and spastic persons in recognised Colleges. Courses of training which have been provided include telephone operating, brush making, machine knitting and handicraft.

During the year, upwards of 20 students have been in attendance at Colleges of this kind.

## REPORT ON STAFFORDSHIRE SPECIAL SCHOOLS, 1960

**Table 36.     Staffordshire Special Schools**

Basford Hall ...	Residential	Maladjusted	30 boys	10—16 years
William Baxter	Day	E.S.N.	110 boys and girls	8—16 years
High Arcal ...	Day	E.S.N.	120 boys and girls	8—16 years
Loxley Hall ...	Residential	E.S.N.	80 boys	8—16 years
Standon Bowers	Residential	E.S.N.	60 boys	10—16 years
Walton Hall ...	Residential	E.S.N.	48 girls	8—16 years
Needwood ...	Residential	Partially Deaf	160 boys and girls	5—16 years
Wightwick Hall	Residential and Day	Physically Handicapped	65 boys and girls (Boarding). 25 boys and girls (Day pupils)	8—16 years



(a) *Standon Bowers Residential School for E.S.N. Boys*

The school has had its full complement of 60 boys throughout the year, and steady and satisfactory progress has been made in the educational work of the school. There has been a considerable increase in out-of-school activities and school teams are now taking part in regular fixtures with other schools. A number of students from the County of Stafford Training College have given valuable assistance in the organisation of activities at the school. A minor capital project is being carried out to provide several urgently needed improvements including the renovation of the classroom toilet block.

(b) *Walton Hall Residential School for E.S.N. Girls*

There has been an average of 47 girls on the roll during the year and a start has been made on the introduction of younger girls into the school. Authority has been given for the age of entry to be reduced to eight, but the process of lowering the age of entry is being carried out gradually so that the school will have time to assimilate the younger pupils. There have been a number of changes in teaching staff during the year. A minor capital project is being carried out to replace two staff houses and to provide a tar paved area.

(c) *Basford Hall Residential School for Maladjusted Boys*

The full complement of 30 boys has been maintained throughout the year and work has progressed satisfactorily. During the summer the school camp site was in constant use and this has proved a most popular activity. Plans for the new school have been completed and work on its erection will start during 1961.

(d) *William Baxter Day Special School for Educationally Sub-Normal Children*

With the completion of the additional two classrooms at this school, approval has been given for a maximum number of 110 pupils and this number of pupils has been on roll throughout the year. The progress of pupils continues to be satisfactory and a report of H.M. Inspectors spoke highly of the work of the Headmaster and staff. Application has been made to the Ministry of Education for approval to the inclusion in a major building programme of a project to provide replacement buildings on the existing site.

(e) *Loxley Hall Residential School for E.S.N. Boys*

The school has had 80 boys on roll throughout the year, which is the maximum number for which accommodation is available. For the first time a party of boys from the school has this year spent a week at Coven Camp, and this proved a most successful activity. A number of events have been organised to raise money for a proposed swimming bath. Plans have been prepared for the major extensions to the school and a proposal submitted to the Ministry of Education for an immediate minor project to provide improved dining and cloakroom facilities and new staff houses.

(f) *Needwood Residential School for Partially Deaf Children*

There has been an increase in the number of children on roll during the year and at the end of the autumn term 1960 there were 144 pupils at the school, of whom 78 were boys and 66 girls. This total included 34 Staffordshire children and 110 out-county children. Work has continued satisfactorily and the school has been successful in integrating a new intake of very young pupils. There was some difficulty in the early part of the year in finding suitable applicants for vacancies on the household staff, but all posts have now been filled. A minor project has been completed during the year and the school now has available a new science laboratory and a shower room for the girls.

(g) *Wightwick Hall Residential School for Physically Handicapped Children*

At the end of the summer term 1960 there were 81 children on roll, but this number had fallen to 73 by the end of the autumn term. Of the 73 pupils 57 were Residential and 16 Day. It is proposed to admit a number of younger children from the age of 5 years, of which there is a considerable waiting list of both potential residential and day pupils. Additional household staff is being appointed with this in view. Temporary classrooms are still being used to accommodate some of the pupils, but it is anticipated that a minor project to provide additional teaching and day room accommodation will be undertaken during the next financial year.

(h) *High Arcal Day School for E.S.N. Children*

This school has maintained its full complement of 120 children throughout the year and there is a long waiting list of prospective entrants. A new Special School is to be built in the Tipton area in order to provide additional accommodation. There have been two staff changes during the year and a new Deputy Head has been appointed. The work of the school has progressed satisfactorily and parents of the pupils continue to give strong support to the Headmaster and staff. There have been some adjustments to the western boundary of the school in order to provide an adequate access road to the new High Arcal Grammar/Technical School.



**BOROUGH OF NEWCASTLE-UNDER-LYME**  
(Excepted District)

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**SCHOOL HEALTH SERVICE STAFF**

*Borough School Medical Officer :*

JOHN WARRACK, M.B., Ch.B., D.P.H.

*Deputy Borough School Medical Officer :*

HUGH R. MORRISON, M.B., Ch.B., D.P.H.

*School Medical Officers :*

DAVID L. LEWIS, L.M.S.S.A., D.P.H.

(Appointed 17.10.60)

DONALD B. MORRIS, M.B., Ch.B., D.P.H.

DR. T. CRAIG (Part-time)

DR. P. G. JOHNSON (Part-time)

*Physiotherapist (Part-time) :*

MISS L. M. LOCKETT, M.C.S.P.

*Speech Therapist (Part-time):*

MISS E. GOSS-CUSTARD, F.C.S.T. (Appointed 8.9.60)

*Ophthalmic Surgeon (Part-time) :*

P. J. M. KENT, M.R.C.S., L.R.C.P., D.O.M.S.

*Borough School Dental Officers :*

Area Dental Officer—

R. G. C. DEMPSTER, L.D.S., R.F.P.S. (Glas.).

School Dental Officers—

Two vacancies

*Dental Anaesthetist (Part-time) :*

DR. H. B. DEAS

DR. Z. S. MILEWSKI

*Dental Hygienist (Part-time) :*

MRS. P. M. SKINNER (Resigned 13.4.60)



**Nursing Establishment**

The equivalent of  $4\frac{3}{11}$  full-time duties is given by the nursing staff as follows :—

Five nurses gave 5 half days per week to the School Health Service. Two nurses gave 4 half days per week to the School Health Service. One nurse gave 3 half days per week to the School Health Service. One nurse gave full-time to the School Health Service. In addition three assistant nurses gave full-time service to the School Health Service.

**School Population**

The number of pupils on the registers of maintained schools (including Nursery Schools) at the end of the year was 13,767 which was an increase of 154 compared with a decrease of 2 in 1959/60, and an increase of 116 in the previous year.

Number of Schools or departments :—

Nursery Schools	...	...	...	...	4
Infant departments	...	...	...	...	11
Infant & Junior departments			...	...	8
Junior departments	...	...	...	...	10
C.E. Mixed (Infants Junior & Secondary Modern)					1
Secondary Modern Schools...			...	...	8
Secondary Grammar Schools			...	...	4
Blackfriars Special School	...	...	...	...	1

**Arrangements made for Periodic Medical Inspections**

As in previous years periodic medical inspections of children attending schools within the Borough were carried out as follows :—

(1) during the first year of school life ; (2) between the ages of 9 and 10 ; (3) between the ages of 14 and 15 and (4) in County Grammar Schools between the ages of 17 and 18.

Special arrangements exist for medical inspection at the Nursery Schools and at the Blackfriars Special School. The practice applied to these establishments being that a visit is paid every term, at which approximately one third of the children are examined along with re-examinations and absentees from the previous examinations. This ensures that each child is seen annually.

In addition all children have an eyesight test between their 7th and 8th birthday, special provision being made for those who do not know their letters.

2,911 parents were present at the examination of their children. This figure represents only 53·8 per cent of the children examined and is most disappointing.

## **REVIEW OF THE FACTS DISCLOSED BY MEDICAL INSPECTION AND OF THE METHODS EMPLOYED FOR THE TREATMENT OF DEFECTS**

### **Clothing and Footwear**

No child was found at medical inspection to have defective clothing or footwear but, of course, this must not be taken to mean that such cases do not occur at any time within the schools.

### **Physical Condition**

The physical condition of the children examined at periodic medical inspections is shown in Table I.A. in the statistical tables at the end of this report. (Page 110)

### **Uncleanliness**

23 children were found to be verminous at routine school medical inspections. This number does not include children found to be verminous during cleanliness surveys or at clinics.

### **Tonsils and Adenoids**

At periodical and special examinations 99 children were found to be suffering from enlarged tonsils and/or adenoids and were referred for examination by a specialist. During the year 191 cases received operative treatment through arrangements made by the School Health Service. In addition there were 547 cases which required only medical treatment and/or observation.

### **Tuberculosis**

During 1960, 5 children were referred to the Chest Physician for examination. In no case was the diagnosis confirmed.

## **Skin Diseases**

219 cases of skin disease (dermatitis, impetigo, urticaria, ringworm, etc.) were discovered at medical inspections and found to require treatment. Four of the cases of skin disease were referred to the Dermatological Clinic at the North Staffs. Royal Infirmary for investigation and treatment.

## **External Eye Disease**

There were no cases of external eye disease referred for treatment during the year to the North Staffordshire Royal Infirmary.

## **Defective Vision and Squint**

201 cases of defective vision and squint were discovered at routine and special medical examinations and were referred for treatment, being 183 cases of defective vision and 18 cases of squint. In addition 2 cases of squint discovered at examinations at school clinics were also referred for treatment. During the year 142 children with defective vision were prescribed glasses after examination by the School Ophthalmic Surgeon.

## **Ear Disease and Defective Hearing**

At routine medical inspections during 1960, 55 cases in this category were found to require treatment and of this number 10 were referred to the North Staffordshire Royal Infirmary, the remainder being treated at the school clinics.

## **ADDITIONAL EXAMINATIONS**

### **Medical Inspection prior to admission to Training Colleges**

During 1960, 83 pupils have had a special medical examination by the School Medical Officers before admission to colleges for training for the teaching profession, as is required by the Ministry of Education.

### **Medical Inspection of new Entrants to the Teaching Profession**

During 1960, 26 medical examinations, with subsequent x-ray of chests as required by the Ministry of Education, were carried out on new entrants to the teaching profession within the Borough.

### **Children attending School Camps**

During the year 612 children were subjected to the necessary medical examination before attending organised School Camps.



## TREATMENT OF UNCLEANLINESS

Periodic inspection of children, to ascertain the condition of cleanliness of their heads and bodies, was carried out on 11,007 children during the year, giving a total of 62.665 examinations. 1,477 individual pupils were found to be infested and cleansing notices were issued in each case.

347 children were cleansed at special sessions at school clinics.

### Ophthalmic Clinic

This clinic is held each Friday morning in the Ophthalmic Room at Friarswood School Clinic. During the year 627 children had refractions carried out and in 222 cases spectacles were prescribed.

### Physiotherapy

The Physiotherapist continued to attend at Friarswood House, Priory Road, Newcastle. Additional sessions have been arranged at the Blackfriars Special School.

Attendances at these various sessions during the year 1960 were as follows:-

	<i>Breathing Exercises</i>	<i>Remedial Exercises</i>	<i>Sun-Ray Treatment</i>
Blackfriars School	67 children 295 attendances	27 children 99 attendances	42 children 147 attendances
Friarswood Clinic	75 children 451 attendances	108 children 727 attendances	140 children 1,395 attendances

### Child Guidance

The arrangements existing between the excepted District and the Stoke-on-Trent Education Authority continued during the year. Pupils attending schools within the Borough who are in need of Child Guidance treatment can be referred for investigation and treatment in the City. During 1960, 9 cases were dealt with in this way.



### Blackfriars Special School

At the end of the year the school had 57 registered pupils being 15 physically handicapped children and 42 delicate children. The following table gives the broad classification of the types of handicapped children catered for during the year.

<i>Hearts</i>	<i>Defects of Central Nervous System</i>	<i>Orthopaedic Defects</i>	<i>Diseases of Lungs, etc.</i>	<i>Miscellaneous</i>
3	8	7	35	4

### Minor Ailment Clinics

During the year eight minor ailment clinics in the Borough continued to operate as follows:—

Bradwell C.S.M. School	Monday Tuesday	9.30 a.m. to 11.00 a.m. 9.30 a.m. to 11.00 a.m.
(As from 15.11.60)		
Chesterton	Monday	9.30 a.m. to 12 noon
Broadmeadow	Friday	11.00 a.m. to 12 noon
Crackley Bank C.P. School	Wednesday	10.00 a.m. to 11.00 a.m.
Hempstalls School	Wednesday	10.00 a.m. to 11.00 a.m.
Knutton	Tuesday	10.30 a.m. to 12 noon
High Street	Friday	9.30 a.m. to 10.30 a.m.
Newcastle	Monday	9.30 a.m. to 12 noon
Friarswood	Tuesday	9.30 a.m. to 12 noon
	Wednesday	9.30 a.m. to 12 noon
	Thursday	9.30 a.m. to 12 noon
	Friday	2.00 p.m. to 4.00 p.m.
Silverdale	Thursday	10.30 a.m. to 11.30 a.m.
Crown Street		
Wolstanton	Monday	9.00 a.m. to 11.00 a.m.
Lily Street	Tuesday	9.00 a.m. to 11.00 a.m.
	Wednesday	9.00 a.m. to 11.00 a.m.
	Thursday	9.00 a.m. to 12 noon
	Friday	9.00 a.m. to 11.00 a.m.

Minor Ailments are treated at school clinics and the cases dealt with are included in Table III at the end of this report. During the year the number of attendances at the various minor ailment clinics was 11,378 which is a decrease of 988 over the figure for 1959.

## SCHOOL DENTAL SERVICE

The Area Dental Officer for the Borough has provided the following report on the work of his service during 1960 :—

“The only change in the staff was caused by the resignation in April of Mrs. Skinner, the part-time dental hygienist.

Routine inspection and treatment was carried out in schools in the central part of Newcastle as in 1959. In addition two new schools had their first dental inspection and two schools their first for six years. As one would expect the last two schools required more treatment, especially extractions, than those being regularly inspected.

In the three months prior to her resignation Mrs Skinner had given on one day each week, short film-strip lectures on dental hygiene, in schools, in the district. In all she gave 69 lectures and they seemed to be favourably received, but they were not continued over a long enough period for their influence to be judged.

Normal working routine was continued during the school holidays and except during “Wakes Week”, the attendance, although below that in term-time, was satisfactory.”

The following is a summary of the work done during the year by the Area Dental Officer and the Dental Hygienist :—

No. Children Inspected at Routine Inspections ...	5,547
No. Requiring Treatment ... ..	3,503
No. Referred for Treatment ... ..	3,478
No. Casual or Emergency Cases Inspected and Treated ... ..	716
Total No. of Attendances ... ..	3,789
No. Sessions devoted to Inspection ... ..	24
No. Sessions devoted to Treatment ... ..	440
No. Sessions devoted to Administration ... ..	2
No. Fillings in Temporary Teeth ... ..	915

No. Temporary Teeth Filled	...	...	...	794
No. Fillings in Permanent Teeth	...	...	...	2,748
No. Permanent Teeth Filled	...	...	...	2,218
Total No. of Fillings	...	...	...	3,663
Total No. of Temporary Teeth Extracted	...	...	...	2,292
Total No. of Permanent Teeth Extracted	...	...	...	626
Total No. of Local Anaesthetics	...	...	...	1,141
Total No. of General Anaesthetics	...	...	...	350
Parents present	...	...	...	2,182

### Sundry Operations

Impressions	...	...	...	...	...	20
Scale	...	...	...	...	...	19
Bleeding arrested after Haemorrhage	...	...	...	...	...	2
X-ray	...	...	...	...	...	22
Dentures Fitted	...	...	...	...	...	9

### Orthodontics

Regulation Plate Fitted	...	...	...	...	17
Regulation Supervision	...	...	...	...	105
Zinc Oxide Dressing	...	...	...	...	140
Root Canal Dressing	...	...	...	...	17
Root Canal Filling	...	...	...	...	2

APPOINTMENTS			TREATMENT				
1st	2nd	Parent	Scale	Polish	Advice	Gum T.	Lectures
77	36	9	41	74	80	7	69

### Newcastle High School Swimming Bath

Samples of water from the above mentioned bath were submitted for examination on three occasions during 1960, all of which proved satisfactory.

### X-ray of Kitchen Staff

During 1960, 84 members of the school meals service kitchen staff were x-rayed at the Chest Clinic under the scheme whereby each applicant for a post in this service must be declared free from pulmonary infection radiographically before being appointed.



### **Mantoux testing of school children**

The scheme to trace children who had already been in contact with tubercular infection continued until November, the five year old age group being selected for this purpose.

The following shows the number of children dealt with and the results obtained:—

No. Eligible	No. Tested	% Tested	No. Positive	% Positive
1457	878	60%	4	0·4

### **Disinfection of Plimsolls**

As in recent years plimsolls used in the schools are regularly disinfected by a special process at the Froghall Disinfection Centre. This is in an endeavour to control the incidence and spread of foot infections. During the year all the plimsolls used in the schools were disinfected during the Easter, Summer and Christmas holiday periods.

### **Milk in Schools**

The milk supplied to schools is sampled from time to time by the Public Health Inspection Staff. During the year 15 such samples were submitted for examination at the Public Health Laboratory and all were found to be satisfactory both in cleanliness and degree of pasteurisation.

### **Inspection of School Meals Premises**

The Public Health Inspectors of the Borough pay periodic inspections to premises connected with the preparation and serving of school meals. Defects which are found on such visits are reported to the Borough Education Officer. 74 visits were paid to these premises during 1960.

## **ALLIED SERVICES**

The following reports, which deal with services intimately connected with the physical welfare of the school child, have kindly been supplied in respect of (1) The School Meals Service by Miss M. P. Barnes, School Meals Organiser and (2) Physical Education by Mr. G. E. Kirkby, the Physical Education Organiser.

## (1) SCHOOLS MEALS SERVICE

During the year January 1960 to December 1960, school meals were supplied to the children and Staff in the Borough of Newcastle-under-Lyme from the following kitchens :—

Knutton Central Kitchen	Hempstalls C.P. School
Bradwell C.P. School	Langdale C.P. School
Bradwell C.S. School	Silverdale C.P. School
Bursley C.P. School	St. Wulstan's R.C. School
Cherry Hill C.P. School	Four Grammar Schools
Crackley Bank C.P. School	Four Nursery Schools
Ellison St. C.P. School	

Blackfriars School—Opened September, 1960.

Figures given below show the daily average number of meals served each month throughout the year as compared with January, 1959 to December, 1959 :—

Month	1959	1960	Month	1959	1960
January	5,941	6,353	July	5,501	5,693
February	5,879	6,283	August	Holiday Period	
March	5,580	6,321	September	6,279	6,670
April	6,035	6,355	October	6,238	6,719
May	5,976	6,163	November	6,180	6,628
June	5,750	5,951	December	6,287	6,645

### Holiday Feeding

As in previous years, arrangements for the provision of school meals during holiday periods were made so that any child could on application receive a school dinner. Children who stayed away for more than half the total number of days in any one holiday period, unless the parents had given a satisfactory explanation as to the reason for their absence, were denied meals the following holiday. In every case letters were sent to the parents of the children concerned, explaining why they could not have dinners.

Approximately 175 children applied for meals during each holiday period.

Throughout the year the holiday meals were supplied on rota from the following kitchens:—

Cherry Hill C.P. School  
Hempstalls C.P. School

Knutton Central Kitchen  
Langdale C.P. School  
St. Wulstan's R.C. School

and distributed to various school meals centres throughout the Borough. Arrangements were made to open one meals centre in each of the following areas:—

Chesterton, Knutton, Newcastle and Wolstanton

### **Maintenance of Equipment**

The replacement of worn out glazed sinks and draining boards continued throughout the year. Stainless steel sinks and units will be used wherever possible in future and in all new kitchens and wash-ups.

“Wash Your Hands” and “No Smoking” notices are displayed in all necessary places.

### **Light Equipment**

The policy of supplying to the kitchens additional equipment wherever possible and replacing old and obsolete equipment, continued throughout the year. Beakers are gradually being replaced with unbreakable glasses.

### **New Kitchen — Blackfriars**

Blackfriars School kitchen for handicapped children opened in September, 1960, serving approximately sixty-five meals per day. All the children have a school meal and two hot drinks, one in the morning and the other in the afternoon.

### **Dining arrangements**

Small groups dine together as “families” and the meal itself is served at the table. These arrangements make it comparatively easy to allow each child to have the size of helping suited to his needs, thus reducing wastage of food. This method of service reduces movement and noise to a minimum and good social habits are formed.

Individual diets are prepared for children requiring them.

### **Nursery Schools**

Half a fluid ounce of cod liver oil has been supplied to each child in attendance per week. This is in excess of that which is given to their parents at the Welfare Clinics



## Hygiene

As in previous years visits were made to all the kitchens by some of the Council's Sanitary Officers and any specific undesirable features dealt with as the opportunity arose.

Kitchen helpers and staff were all X-rayed and as usual new school meal staff continued to be medically examined and X-rayed prior to their official appointment. Staff continued to produce after any period of absence a medical certificate stating that they were free from any disease which might make the preparation or handling of food by them harmful to others.

Uniform was supplied to all school meals employees and their overalls laundered weekly. Caps, white aprons, tea-cloths, dishcloths, etc. are boiled daily in each kitchen.

First aid supplies were issued to the kitchens and schools each term.

Every day, at each kitchen, a full specimen meal was put into the refrigerator and kept for twenty-four hours.

Any food left over was disposed of daily.

## Meetings

Meetings of Cook Supervisors were held each term.

The Service progressed steadily throughout the year and the meals were enjoyed both by Staff and children alike.

## (2) PHYSICAL EDUCATION

### General Survey

Progress has been maintained in all branches of Physical Education during the year of 1960. Deficiencies noted in the report of 1959 are still evident though less in number.

The provision of clothing and plimsolls in both Secondary Modern and Primary Schools is up to the requisite standard and the accommodation for the storage of these items is adequate.

The disinfection of all areas used for changing and showering introduced in 1959 has been continued. These areas have at least one swabbing out with disinfection solution per day.

## **Secondary Schools**

Progress in Physical Education has continued in the Modern Schools despite the difficulties experienced in most of these departments owing to the lack of suitable indoor accommodation.

There is still a marked deficiency of changing and shower accommodation, though a start has been made to provide better changing rooms where this is practicable and plans are in hand to include showers where feasible.

Facilities for Physical Education in Grammar Schools are good now that the replacement of fixed apparatus is completed. All four Grammar School gymnasiums are now up to the required standard, though the changing rooms and shower accommodation in two of the schools are sub-standard.

## **Primary Schools**

Further progress has been made with the supply of climbing and agility apparatus to be installed in the playgrounds and halls of Primary Schools. Plans have been drawn up for the installation of apparatus in two Junior School halls.

The lack of suitable indoor accommodation still retards progress in some primary Departments. Conversion of cloakroom space into changing rooms has been carried out where facilities permit. In most of our old Primary Departments, changing for Physical Education must be carried out in classrooms and this raises considerable difficulties when dealing with the older age groups.

The opening of Blackfriars School has brought children, hitherto excluded because of disabilities, within the field of Physical Education.

A specialist teacher of Physical Education, working with small groups with modified equipment, has laid a solid foundation on which to base future work in this school.

## **Playing Fields**

A lack of playing field space is still evident in the Borough. This means that a very heavy load is placed on our central

field at Pool Dam, It has been necessary to continue transport of children by bus from the Watlands and Wolstanton areas to Pool Dam and Bradwell fields.

The summer season of 1960 saw Pool Dam again being worked to its maximum, catering not only for athletics, cricket and rounders, but also for volley ball, basketball, netball, padder, tennis and soft ball. Special cricket coaching nets for Junior children were also erected.

It is to be regretted that there are still cricket squares that are not sufficiently prepared. This point is one of the most serious handicaps to the development of cricket in the schools, but I am pleased to report that a start has been made on the laying of a cricket table at Pool Dam.

### **National and Minor Games**

There has been a full programme of competitive sport both at Junior and Secondary level.

Senior and Junior football leagues are in operation, whilst football matches at Intermediate level are also arranged. Inter-town competitions at Junior, Intermediate and Senior Levels are also in operation.

Inter-school cricket matches for Secondary Schools have again been a feature of the summer games programme, though as stated earlier, the absence of prepared cricket squares handicaps this game.

It is pleasing to see that the interest in many minor games such as basketball, volley ball, soft ball and badminton has been maintained.

### **Athletics**

All Secondary Schools and many Primary Schools held their own Athletic Sports during the summer term of 1960. At the Ninth Annual Athletics Sports Meeting for Secondary Schools held at Pool Dam there was featured a wide range of events.

The Junior Schools Athletic Sports, which were re-introduced in 1958, were again held this year with much success.



The Cross Country League introduced in 1959 was a success and this venture has now become an annual feature.

## Swimming

Owing to the lack of facilities, regular swimming instruction can only be given to first and second year scholars of Secondary Schools. It is to be regretted that this instruction cannot be given to Junior School children as well, as a course of two years can hardly be expected to develop a competent swimmer. The erection of the instructional swimming bath, due to be built at the Hempstalls Junior School, was delayed, but a start is visualised early in 1961.

Facilities are used to the fullest extent, instruction being carried out during the lunch-time and also after school when swimming clubs composed of third and fourth year pupils have use of the bath.

Instruction in swimming and life saving is given during club time and proficiency examinations in this subject arranged.

During the year some 53,000 attendances were recorded by scholars of the first and second year in Secondary Modern Schools who attended the baths for instruction.

Some 5,600 attendances, a rise of 1,000 over 1959, were recorded by scholars of the third and fourth years of Secondary Modern Schools who attended the swimming clubs held weekly between the hours 4.0 p.m.—5.0 p.m. These clubs are supervised voluntarily by teachers under the guidance of the swimming coaches.

Progress in swimming can be judged by the awards gained by scholars attending the baths. This past year has seen the attainment of 1,443 braid tests and 164 awards of the Royal Life Saving Society and Amateur Swimming Association. 73 Resuscitation certificates were also awarded by the Royal Life Saving Society to boys in the Borough.

Most of the Secondary Modern Schools in the Borough held their own Swimming Gala during the summer term. These were most successful and are now forming an important part in the Physical Education programme of the Schools.

An innovation of 1960 was the Squadron Race Competition for girls of the 11 to 13 year age range. The team race competition, run in four leagues now consists of medley races for senior boys and girls and squadron races for junior boys and girls.

## **Camping**

369 scholars, representing six Boys' Departments and five Girls' Departments, attended camps organised by the Staffordshire Education Committee at Teddesley Park, Coven, Chasewater, Cotwalton, Dowel Farm and Bryn Crug during the summer of 1960. A wide range of activities, map work, canoeing, sailing, rock climbing and trek camping, provided an attractive and profitable programme.

During the Autumn term 22 boys and 24 girls attended adventure camping courses. These courses are designed to act as a challenge to the children and a high standard of initiative, determination and courage is required.

Some schools in the Borough now run their own camping clubs and thus make full use of the camping equipment that may be obtained on loan from the Education Office.

## **Courses**

During 1960 various courses for teachers were held. These included Tennis, Hockey, Basketball, Trampolining, Sailing and Canoeing.

Teachers from the Borough also attended courses organised by various outside Physical Education bodies.

## **Conclusion**

In conclusion I would like to thank the large numbers of teachers who so willingly devoted many hours of their own time to aid the development of Physical Education in the Borough.

This amount of voluntary work, given so readily, is one of the reasons that progress is to be noted in the competitive and recreative fields of Physical Education.

TABLE I

## PART A—PERIODIC MEDICAL INSPECTIONS

Medical Inspection of pupils attending Maintained Primary and Secondary Schools (including Special Schools). Year ended 31st December 1960.

<i>Age Groups Inspected (By year of Birth)</i>	<i>No. of Pupils Inspected</i>	<i>Physical Condition of Pupils Inspected</i>			
		<i>Satisfactory</i>		<i>Unsatisfactory</i>	
		<i>No.</i>	<i>% of Col. 2</i>	<i>No.</i>	<i>% of Col. 2</i>
		(3)	(4)	(5)	(6)
1956 and later ...	92	92	100	—	—
1955 ...	211	208	98.5	3	1.5
1954 ...	1,180	1,177	99.7	3	0.3
1953 ...	381	376	98.7	5	1.3
1952 ...	128	125	97.7	3	2.3
1951 ...	499	497	99.6	2	0.4
1950 ...	87	86	98.8	1	1.2
1949 ...	104	103	99.1	1	0.9
1948 ...	209	206	98.6	3	1.4
1947 ...	86	85	98.8	1	1.2
1946 ...	1,361	1,361	100	—	—
1945 and earlier ...	1,072	1,071	99.9	1	0.1
TOTAL ...	5,410	5,387	99.6	23	0.4

## PART B—PUPILS FOUND TO REQUIRE TREATMENT

## AT PERIODIC MEDICAL INSPECTIONS

(excluding Dental Diseases and Infestation with Vermin)

<i>Age Groups Inspected (By year of Birth)</i>	<i>For Defective vision (excluding squint)</i>	<i>For any of the other conditions recorded in Table II</i>	<i>Total Individual Pupils</i>
(1)	(2)	(3)	(4)
1956 and later...	—	11	8
1955 ...	—	73	68
1954 ...	2	179	138
1953 ...	—	35	33
1952 ...	2	43	40
1951 ...	15	57	60
1950 ...	4	32	29
1949 ...	8	25	29
1948 ...	12	61	62
1947 ...	5	36	36
1946 ...	83	123	154
1945 and earlier ...	50	74	108
TOTAL ...	181	749	765



**PART C—OTHER INSPECTIONS**

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Number of Special Inspections	...	...	...	...	...	...	169
Number of Re-inspections	...	...	...	...	...	...	498
			Total	...	...	...	<u>667</u>

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**PART D—INFESTATION WITH VERMIN**

Total number of individual examinations of pupils in schools by school nurses or other authorised persons	...	...	62,665 examinations 11,007 pupils
Total number of individual pupils found to be infested	...		1,422
Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944)	...		1,422
Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944)	...		347

**TABLE II.**  
**PART A—PERIODIC INSPECTIONS**  
**Return of Defects found by Medical Inspection during the year ended**  
**31st December, 1960**

Defect Code No.	Defect or Disease (2)	ENTRANTS		LEAVERS		OTHERS		TOTAL	
		Requir- ing Treat- ment (3)	Requir- ing Obser- vation (4)	Requir- ing Treat- ment (5)	Requir- ing Obser- vation (6)	Requir- ing Treat- ment (7)	Requir- ing Obser- vation (8)	Requir- ing Treat- ment (9)	Requir- ing Obser- vation (10)
(1)	(2)								
4	Skin ...	54	89	126	94	39	40	219	773
5	Eyes— (a) Vision (b) Squint (c) Other	3 14 5	21 36 16	133 3 —	335 22 9	45 1 1	151 18 4	181 18 6	507 76 29
6	Ears— (a) Hearing (b) Otitis Media (c) Other	2 11 7	13 15 28	— 5 17	19 30 36	2 5 6	9 22 18	4 21 30	41 67 82
7	Nose and Throat	64	240	10	67	22	30	96	337
8	Speech ...	2	39	2	16	4	13	8	68
9	Lymphatic Glands	2	42	—	8	—	13	2	63
10	Heart ...	1	66	4	66	—	27	5	159
11	Lungs ...	38	138	14	63	23	57	75	258
12	Developmental— (a) Hernia (b) Other	2 7	21 104	2 12	9 101	5 11	6 50	9 30	36 255
13	Orthopaedic— (a) Posture (b) Feet (c) Other	— 25 17	1 67 47	6 55 12	16 52 91	7 44 25	7 58 51	13 124 54	24 177 189
14	Nervous System— (a) Epilepsy (b) Other	— 7	3 35	1 —	7 14	— 1	2 20	1 8	12 69
15	Psychological— (a) Development (b) Stability	6 11	10 91	— —	5 33	7 —	9 40	11 15	24 164
16	Abdomen ...	1	22	1	29	1	11	3	62
17	Other ...	16	34	5	55	6	37	27	126

## PART B—SPECIAL INSPECTIONS

Defect Code No. (1)	Defect or Disease (2)	SPECIAL INSPECTIONS	
		Pupils requiring Treatment (3)	Pupils requiring Observation (4)
4	Skin ... ..	3	7
5	Eyes—		
	(a) Vision ... ..	2	15
	(b) Squint ... ..	—	3
	(c) Other ... ..	—	—
6	Ears—		
	(a) Hearing... ..	—	3
	(b) Otitis Media ... ..	3	3
	(c) Other ... ..	—	2
7	Nose and Throat ... ..	3	13
8	Speech ... ..	1	5
9	Lymphatic Glands ... ..	—	2
10	Heart... ..	—	13
11	Lungs ... ..	7	36
12	Developmental—		
	(a) Hernia ... ..	—	2
	(b) Other ... ..	—	9
13	Orthopaedic—		
	(a) Posture ... ..	—	1
	(b) Feet ... ..	3	4
	(c) Other ... ..	5	20
14	Nervous System—		
	(a) Epilepsy ... ..	—	1
	(b) Other ... ..	1	5
15	Psychological—		
	(a) Development ... ..	3	12
	(b) Stability ... ..	5	5
16	Abdomen ... ..	1	1
17	Other... ..	4	8

**TABLE III. Part A—Eye Diseases, Defective Vision and Squint Treatment of Pupils Attending Maintained Primary and Secondary Schools (Including Nursery Schools)**

	<i>Number of cases known to have been dealt with</i>
External and other, excluding errors of refraction and squint ... ..	184
Errors of Refraction (including Squint) ... ..	627
Total ... ..	811
Number of pupils for whom spectacles were prescribed	222

### Part B—Diseases and Defects of Ear, Nose and Throat

	<i>Number of cases known to have been dealt with</i>
Received operative treatment—	
(a) for diseases of the ear ... ..	10
(b) for adenoids and chronic tonsillitis ... ..	191
(c) for other nose and throat conditions ... ..	23
Received other forms of treatment ... ..	210
Total ... ..	434
Total number of pupils in schools who are known to have been provided with hearing aids—	
(a) in 1960 ... ..	1
(b) in previous years ... ..	5



## Part C—Orthopaedic and Postural Defects.

	<i>Number of cases known to have been treated.</i>
(a) Pupils treated at clinics or out-patients departments ... ..	123
(b) Pupils treated at school for postural defects	27
Total ... ..	150

## Part D—Diseases of the Skin (Excluding uncleanness, for which see Part D of Table I.)

	<i>Number of cases known to have been treated</i>
Ringworm—(a) Scalp ... ..	—
(b) Body ... ..	2
Scabies ... ..	—
Impetigo ... ..	35
Other skin diseases ... ..	1,942
Total ... ..	1,979

## Part E—Child Guidance Treatment

	<i>Number of cases known to have been treated</i>
Pupils treated at Child Guidance Clinics ... ..	9

## Part F—Speech Therapy

	<i>Number of cases known to have been treated</i>
Pupils treated by speech therapists ... .. (From September, 1960)	32

## Part G—Other Treatment Given.

	<i>Number of cases known to have been dealt with.</i>
(a) Pupils with minor ailments	746
(b) Pupils who received convalescent treatment under School Health Service arrangements	15
(c) Pupils who received B.C.G. vaccination	670
(d) Other than (a), (b) & (c) above	
Respiratory ... ..	51
Injuries ... ..	990
Debility ... ..	4
TOTAL	2,476

# Dental Inspection and Treatment carried out by the Authority during 1960

## TABLE IV.

(1) Number of pupils inspected by the Authority's Dental Officers :—								
(a) At Periodic Inspections	...	...	...	...	...	...	...	5,547
(b) At Special Inspections	...	...	...	...	...	...	...	716
Total (1)	...	...	...	...	...	...	...	6,263
(2) Number found to require treatment	...	...	...	...	...	...	...	4,219
(3) Number offered treatment	...	...	...	...	...	...	...	4,194
(4) Number actually treated	...	...	...	...	...	...	...	2,299
5) Number of attendances made by pupils for treatment including those recorded at 11 (h)	...	...	...	...	...	...	...	3,789
(6) Half days devoted to—								
(a) Periodic (School) Inspection	...	...	...	...	...	...	...	24
(b) Treatment	...	...	...	...	...	...	...	440
Total (6)	...	...	...	...	...	...	...	464
(7) Fillings—								
(a) Permanent Teeth	...	...	...	...	...	...	...	2,748
(b) Temporary Teeth	...	...	...	...	...	...	...	915
Total (7)	...	...	...	...	...	...	...	3,663
(8) Number of Teeth Filled—								
(a) Permanent Teeth	...	...	...	...	...	...	...	2,218
(b) Temporary Teeth	...	...	...	...	...	...	...	794
Total (8)	...	...	...	...	...	...	...	3,012
(9) Extractions—								
(a) Permanent Teeth	...	...	...	...	...	...	...	626
(b) Temporary Teeth	...	...	...	...	...	...	...	2,292
Total (9)	...	...	...	...	...	...	...	2,918
(10) Administration of general anaesthetics for extraction	...	...	...	...	...	...	...	350
(11) Orthodontics—								
(a) Cases commenced during the year	...	...	...	...	...	...	...	17
(b) Cases carried forward from previous year	...	...	...	...	...	...	...	1
(c) Cases completed during the year	...	...	...	...	...	...	...	8
(d) Cases discontinued during the year	...	...	...	...	...	...	...	2
(e) Pupils treated with appliances	...	...	...	...	...	...	...	18
(f) Removable appliances fitted	...	...	...	...	...	...	...	17
(g) Fixed appliances fitted	...	...	...	...	...	...	...	1
(h) Total attendances	...	...	...	...	...	...	...	130
(12) Number of pupils supplied with artificial teeth	...	...	...	...	...	...	...	9
(13) Other operations—								
(a) Permanent Teeth	...	...	...	...	...	...	...	—
(b) Temporary Teeth	...	...	...	...	...	...	...	—
Total (13)	...	...	...	...	...	...	...	—

TABLE V.

## Staff of the School Health Service

								<i>Number of Officers</i>	<i>Number in terms of full-time Officers employed in the School Health Service*</i>		
(a) *Medical Officers (including the Principal School Medical Officer):—											
(i) Whole-time School Health Service... ..								—	—		
(ii) Whole-time School Health and Local Health Services ...								4	1.8		
(iii) General practitioners working part-time in the School Health Service ... ..								2	0.27		
(b) Physiotherapists, Speech Therapists, etc. (specify):—											
Physiotherapist ... ..								1	0.45		
Ophthalmologist ... ..								1	0.09		
Speech Therapist ... ..								1	0.18		
(c) (i) School Nurses ... ..								11	3.27		
(ii) No. of the above who hold a Health Visitors Certificate...								10	—		
(d) Nursing Assistants ... ..								3	3.0		
(e) Dental Staff:—								<i>Officers employed on a salary basis</i>		<i>Officers employed on a sessional basis</i>	
								<i>No. of Officers</i>	<i>Numbers in terms of full-time officers employed in the School Dental Service</i>	<i>No. of Officers</i>	<i>Numbers in terms of full-time officers employed in the School Dental Service</i>
(i) Principal School Dental Officer ...								—	—	—	—
(ii) Dental Officers ... ..								1	1.0	—	—
(iii) Orthodontists (if not already included in (e) (i) or (e) (ii) above) ... ..								—	—	—	—
TOTAL ... ..								1	1.0	—	—
										<i>No. of Officers</i>	<i>Numbers in terms of full-time officers employed in the School Dental Service</i>
(iv) Dental Attendants ... ..										1	1
(v) Other Staff (specify):—											
Dental Anaesthetist ... ..										1	0.09

\*All Medical Officers in the School Health Service other than those employed part-time for specialist examination and treatment only.



# TABLE VI.

I. **NUMBER OF SCHOOL CLINICS** (i.e., Premises at which clinics are held for school children) provided by the Local Education Authority for the medical and/or dental examination and treatment of pupils attending maintained primary and secondary schools.

Number of School Clinics ... 10 (including one Mobile Dental Clinic).

II. **TYPE OF EXAMINATION AND/OR TREATMENT** provided, at the school clinics either directly by the Authority or under arrangements made with the Regional Hospital Board for examination and/or treatment to be carried out at the clinic.

<i>Examination and/or Treatment</i>	<i>Number of School Clinics (i.e. premises) where such treatment is provided</i>	
	<i>Directly by the Authority</i>	<i>Under arrangements made with Regional Hospital Boards or Boards of Governors of Teaching Hospitals</i>
(1)	(2)	(3)
A. Minor Ailment and other non-specialist examination or treatment	8	—
B. Dental ... ..	2	—
C. Ophthalmic ... ..	1	—
D. Ear, Nose and Throat ... ..	—	—
E. Orthopaedic ... ..	1	—
F. Paediatric ... ..	—	—
G. Speech Therapy ... ..	1	—
H. Others (specify):—		
Sun Ray ... ..	1	—
Breathing Exercises	1	—

TABLE VII.

Handicapped Pupils requiring Education at Special Schools approved under Section 9(5) of the Education Act, 1944, or Boarding in Boarding Homes

During the Calendar year ended 31st December 1960, how many handicapped pupils—	(1) <i>Blind</i> (2) <i>Partially sighted</i>	(3) <i>Deaf</i> (4) <i>Partially deaf</i>	(5) <i>Delicate</i> (6) <i>Physically handicapped</i>	(7) <i>Educationally sub-normal</i> (8) <i>Mal-adjusted</i>	(9) <i>Epileptic</i>					
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	
A. were newly placed in special schools (other than hospital special schools) or boarding homes ... ..	—	—	—	—	34	12	—	—	—	46
	—	—	—	—	2	1	5	—	—	8
B. were newly assessed as needing special educational treatment at special schools or in boarding homes ... ..	—	—	—	1	38	15	12	—	—	66
	—	—	—	—	1	1	4	2	—	8
On or about 22nd January 1961, how many handicapped pupils from the Authority's area:—										
C. (i) were on the registers of										
1 maintained special schools										
(a) as day pupils ...	—	—	3	—	33	13	—	—	—	4
(b) as boarding pupils ...	—	—	—	1	—	—	13	1	1	1
2 non-maintained special schools.										
(a) as day pupils ..	—	—	—	—	—	—	—	—	—	—
(b) as boarding pupils ...	4	2	—	—	2	3	1	—	—	1
(ii) were on the registers of independent schools under arrangements made by the Authority ... ..	—	—	—	—	—	—	—	—	—	—
(iii) were boarded in homes and not already included under (i) or (ii) ... ..	—	—	—	—	—	—	—	—	—	—
TOTAL C. ... ..	4	2	3	1	35	16	14	1	1	7
D. were being educated under arrangements made under Section 56 of the Education Act, 1944										
(i) in hospitals ... ..	—	—	—	—	—	—	—	—	—	—
(ii) in other groups ... .. (e.g., units for spastics, convalescent homes)	—	—	—	—	—	—	—	—	—	—
(iii) at home ... ..	—	—	—	—	—	—	—	1	—	1
E. were requiring places in special schools.										
(i) TOTAL (a) day... ..	—	—	—	1	5	2	45	—	—	53
(b) boarding ... ..	—	—	—	—	1	—	6	1	—	8
No. of pupils included in totals above—										
(ii) who had not reached the age of 5:—										
(a) awaiting day places...	—	—	—	—	—	—	—	—	—	—
(b) awaiting boarding places ... ..	—	—	—	—	—	—	—	—	—	—
(iii) who had reached the age of 5 but whose parents had refused consent to their admission to a special school:—										
(a) awaiting day places...	—	—	—	1	1	—	—	—	—	2
(b) awaiting boarding places.	—	—	—	—	—	—	—	—	—	—

**TABLE VII—(continued)**

F	Number of pupils on the registers of hospital special schools ...	—
G.	Number of children reported to the local health authority during the calendar year ended 31st December, 1960—	
(a)	Either Under Section 57 (3) (prior to 1/11/60 or ...	—
	Under Section 57 (4) from 1/11/60 ...	—
(b)	Under Section 57 (5) prior to 1/11/60 ...	1
	of the Education Act, 1944.	

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